COMMUNITY MENTAL HEALTH: A MODEL FOR MINISTRY

FROM THE PERSPECTIVE OF PASTORAL COUNSELING

A Dissertation

Presented to

the Faculty of the School of Theology

at Claremont

In Partial Fulfillment

of the Requirements for the Degree

Doctor of Theology

by

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June 1972

This dissertation, written by

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under the direction of his *Faculty Committee, and approved by its members, has been presented to and accepted by the Faculty of the Southern California School of Theology in partial fulfillment of the requirements for the degree of*

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PREFACE

Pastoral counseling has grown alongside that of depth psychology and psychoanlaysis and has reflected the developments and outgrowths in these areas. For the last five to ten years all three disciplines have been and still are at a crossroad, both in understanding of man and in psychotherapy. The crossroad is due to the growing recognition in the social and behavioral sciences that man cannot be understood apart from his social environment. The "person-in-a-social system" or "person-in-community" becomes a unitary concept. As a result, in the field of psychology a new discipline is emerging called Community Psychology, which attempts to bridge psychology with sociology and anthropology for a more comprehensive view of man.

The implication of this concept in terms of counseling is to understand psychological activity as an interplay between the individual and his environment. This is in contrast to most psychologists who, until recently, have always tended to agree that human behavior is a function of at least two sets of events, namely, those that take place within the individual and those that take place outside of him with psychologists focusing on intraindividual processes leaving the analysis of environment to other disciplines. Such a focus seriously limits our understanding of behavior in the person's total life situation. Another implication is a more efficient use of mental health workers at a time when shortage of professionals is acute.

It is my thesis that pastoral counseling as a discipline needs to be broadened by a redefinition that has a more encompassing foundation which will incorporate a broader, unifying view of man as "person-in-community." In this dissertation I will show the limitations of present dominant definitions and understandings of pastoral counseling, as well as views of man. I will extend or redefine the perspective of pastor as counselor and present a community mental health model for ministry. The new definition will be based on Community Psychology from which a new model for pastoral counseling will emerge. This new model, while it should be individual or person-centered, is not individualistic in its psychological understanding of man nor in its theological implications. This model will include, both practically and theologically speaking, ministering to both the individual and his social structures, meaning his social environment and community consisting of social systems, organizations, institutions and agencies.

I will review the literature in pastoral counseling to the present giving a critique of the various views of pastoral counseling with particular attention to their psychological and theological presuppositions of their view of man. I will then present my definition of pastoral counseling and attempt to support my position from both theoretical and empirical evidence from the social and behavioral sciences. My definition will be based on Community Psychology from which I will build a new model for pastoral counseling. From my model I will draw theological implications utilizing some of the

concepts of H. Richard Niebuhr's thought. His thinking on "radical
monotheism," "social existentialism," and "the responding self,"
will provide useful theological concepts. Historically and theolo-
gically, the Judeo-Christian religion has always been a community
religion. "The Jesus Christ we know is not isolated Christ, rather
we are dependent upon authorities and whole host of witnesses."
(Niebuhr) Niebuhr's point is that life is individual, but not indi-
vidualistic and that life is lived in community. In terms of
methodology this theme will be central throughout the dissertation.
I will conclude with a summary restating the developments of earlier
chapters and citing more important findings, implications and con-
clusions of my dissertation.

CHAPTER I

APPROACHING THE CROSSROADS

THE RISE OF PASTORAL COUNSELING

Pastoral counseling is a relatively new discipline. Its history is short, its developments rapid and its theories are many and sometimes seemingly conflicting. Howard Clinebell is right in his description of a " . . . Renaissance in Pastoral Counseling" since World War II.[1] His assessment of pastoral counseling being at a crossroads in both theory and practice, namely, that "it must find a new level of self-identity and maturity, by deepening its theological roots, broadening its methodology, and discovering its unique contribution to the helping of troubled humanity,"[2] are the main concerns in this dissertation. The crossroad is not unique to pastoral counseling as it exists in other disciplines concerned with helping people. This is due to many factors, some of which include the increasing complexity of man's world and life; rapid social and cultural change made possible by modern technology leading life from an agrarian culture and world view to an urbanized world; the

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[1] Howard J. Clinebell, Jr., _Basic Types of Pastoral Counseling_ (Nashville: Abingdon Press, 1966), p. 16.

[2] Ibid., pp. 16f.

"knowledge explosion" made possible by computers, electronics and
advances in communications; changing life styles of modern man;
and further developments in man's world view, philosophy, and
theology in response to these changes. Central to the crossroads is
the growing recognition in the social and behavioral sciences that
man cannot be understood apart from his social environment, which
has evolved in part as a consequence of the above factors.

Before examining the crossroads, a brief examination of
the history of pastoral counseling leading to the crossroads is
important in order to provide a basis from which we may suggest a
direction in which to proceed.

Pastoral counseling as a discipline has only emerged within
the last generation since World War II. It is a specialization of
pastoral care and pastoral theology, which itself is only a few
hundred years old in terms of this distinction from the broader
area of systematic theology. The first use of the term "pastoral
counseling" was in its present meaning, "but Holman and Stolz did
much to put it into general circulation."[3] When "Systematic coun-
seling"[4] evolved, as over against commonsense method, with such

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[3]Seward Hiltner and Lowell G. Colston, The Context of Pas-
toral Counseling (New York: Abingdon, 1961), p. 256.

[4]William Goulooze, Pastoral Psychology (Grand Rapids: Baker,
1954), pp. 156ff.

works as Rollo May's Art of Counseling,[5] Roger's Counseling and Psychotherapy[6] and others,[7] "counseling" began to be used in relation to the work of the pastor. As Hiltner observed, "Like other professional persons who do counseling, we pastors also came upon it more by accident than by design."[8] After counseling had been established as one of the important roles of the pastor, it was soon realized that pastoral counseling, in a less formal sense, was not new, but has always been part of the pastor's role.

PASTORAL CARE THROUGH CENTURIES

As a discipline the history of pastoral counseling is brief, but its heritage reaches back through the centuries. Charles Kemp traces the roots of pastoral counseling from the New Testament period, through the Medieval period, the Reformation and finally through recent years in America.[9] He makes no clear demarcation

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[5]Rollo May, Art of Counseling (Nashville: Cokesbury, 1939).

[6]Carl Rogers, Counseling and Psychotherapy (New York: Houghton-Mifflin, 1942).

[7]See Goulooze, op. cit., pp. 233f.

[8]Hiltner, op. cit., p. 26.

[9]Charles Kemp, Physicians of the Soul (New York: Macmillan, 1947).

of when pastoral counseling became a discipline, but rather gives the evolution of the "caring of people's souls." He begins from a Christian perspective with Jesus of Nazareth.

> The modern emphasis on psychology and personal work has led to a new appreciation of the insights and methods of Jesus. Fritz Kunkel writes, "Jesus of Nazareth was the greatest psychologist of all times," (In Search of Maturity, Scribner, 1943, p. 12) and in similar vein, Karl Ruf Stolz states, "Jesus was the greatest personal worker of all time." (Church and Psychotherapy, Abingdon-Cokesbury, 1943, p. 60).[10]

Similar to his discussion of Jesus, Kemp discusses "The Pastoral Ministry of Paul" and Paul's sensitiveness and introspectiveness.[11] "In Paul's ministry he faced almost all the problems that a modern pastor has to face--problems of the family, problems of morals, of religious belief, the facing of death, and problems of the church."[12] Kemp proceeds through history in this vein, reviewing contributions of individuals to the "Cure of Souls."

Whereas Kemp drew from biblical content and church history, William Goulooze has thoroughly traced the history of pastoral theology from its beginnings in America to 1950.[13] He divides the history of pastoral theology into three periods, each of which demonstrates specific characteristics. The first period is prior

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[10] Ibid., p. 11.   [11] Ibid., p. 19.

[12] Ibid., p. 21.   [13] Goulooze, op. cit.

to 1850 with the "Beginnings in Pastoral Theology."[14] Goulooze
notes that "the person of the pastor"[15] is strongly emphasized in
such writings as Richard Baxter's The Reformed Pastor[16] and A. Booth's
The Pastor's Manual.[17] During this period "practical experience and
sanctified common sense . . . assured the minister's accomplishment
and success,"[18] as well as systematic visitation. Baxter's state-
ment concerning counseling in 1656 is one that appears quite con-
temporary. "A minister is not to be merely a public preacher but
to be known as a counsellor for their souls as a physician is for
their bodies."[19]

The second period which Goulooze identifies is from 1850 to
1900. The trends noted in the first period are continued and fur-
ther amplified. There are more writings concerning "the person of
the pastor." It is summarized from the writings that "the pastor
in both experience and expression should manifest mannerly habits
and a sincere devotion to God and to the people of his parish."[20]

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[14]Ibid., pp. 26ff.   [15]Ibid.

[16]Richard Baxter, The Reformed Pastor (Philadelphia: West-
minster Press Rev. ed., 1829).

[17]A. Booth, The Pastor's Manual (Hudson, Ohio: Sawyer, Ing-
ersoll, 1852).

[18]Goulooze, op. cit., pp. 28f.

[19]Ibid., p. 32, citing Baxter, op. cit., pp. 149f.

[20]Ibid., p. 37.

It is during this second period that in America for the first time the principles and practice of pastoral theology are organized and presented in a systematic form. "The first American book on pastoral theology came in 1847."[21] Prior to this time all systematic works were apparently in German.[22] Works by men such as P.D. Kidder, J.M. Hoppin, W.A. Plummer, J. Beck, A. Vinet, J.J. Van Oosterzee and others emerge in America during this period.[23] In addition to the flowering of pastoral theology, there emerged an interest in individual case study and the classification of individuals.[24]

While still having a commonsense and advice giving atmosphere during this period, pastoral counseling was developed in a marked way both in outreach and technique.[25] Extending counseling opportunities was emphasized as well as suggestions for carrying out these opportunities. For example:

> P.D. Kidder emphasized the need for clear discernment in determining the character and moral states of individuals; the power of eliciting frank expressions of their feelings, fears and hopes; a tender and persuasiveness of manner; a capacity to remove from their minds any delusions; and a felicitous manner of presenting encouragements.[26]

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[21]Seward Hiltner, Preface to Pastoral Theology (New York: Abingdon Press, 1958), p. 43.

[22]Ibid., p. 224. See pp. 7 & 8 of Ch. 3.

[23]Goulooze, op. cit., pp. 37ff.

[24]Ibid., pp. 41ff.   [25]Ibid., p. 44.   [26]Ibid.

It was recommended that the pastor use the Bible in calling, par-
ticularly with the sick and the afflicted.

Another important development in the last half of the 19th
Century was the rise of psychology and the application of psychology
in a general manner to the work of the pastor. The emphasis on the
individual case study meant a psychological understanding of the
individual. "It was recognized that the condition of spiritual life,
apart from the life in general, could be ascertained only from an
intimate knowledge of the individual."[27] Psychological understanding
of human nature was equally important, i.e., to have a general under-
standing of all people in all spheres of life from birth to death.[28]
In addition to the psychological understanding of the individual and
of human nature, it is of particular interest to note that there is
the recognition of the psychological understanding of the community.[29]
Alexander Vinet, a French writer of the 18th Century, but whose in-
fluence was not felt for a hundred years in his translated work,
introduced this thought:

> The care of souls will not then be the same in town (cities) as
> in the country; in an agricultural country and manufacturing
> districts; in the midst of a people of simple manners, and among
> a refined and educated and educated people. The pastor must
> take all these things into consideration, as also all geographic
> peculiarities, climatic, economic, dialectic and historic. He
> should know the habits, interests, wants, prejudices, and wishes

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[27]Ibid., p. 48.   [28]Ibid., p. 47.   [29]Ibid., p. 46.

of the péople among whom he is located. He should not lim-
it himself to some very obvious data, supplied by a few intro-
ductions, he should wish to study these as they are in
themselves.[30]

There were others of this period, some of whom are D.H. Greer, W.

Gladden, C. Geikie, H.W. Warner, E.D. Weigel[31] who also understood

and stressed the importance of the pastor knowing and understanding

the community in which he was serving. These writers not only saw

the importance of psychology and understanding the individual, but

they also realized that individuals live in community and that changes

in the community or different types of communities affected individ-

uals. This is perceiving the cure and care of souls in a broader

perspective than an individualistic point of view.

The beginnings of pastoral theology evolved prior to 1850 with

further developments during the next fifty years. The third period,

beginning with the twentieth century to the present, Goulooze iden-

tifies with a more specific application of trends already developed

in pastoral psychology.[32] "The person of the pastor" is still cen-

tral in that "the personal life and the pastoral life of the minister

is of primary importance in order to be an efficient shepherd of

souls."[33] D. Bauslin, J. Sheepshanks and F.W. Gunsaulus, Allnatt,

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[30]Ibid., citing Alexander Vinet, Pastoral Theology (Edinburgh:
Clark, 1752), p. 221.

[31]Ibid. See for listing of references for these writers'works.

[32]Ibid., pp. 49ff.   [33]Ibid., p. 52.

T.W. Pym and others, all emphasized the necessity for the minister to be a leader in the affairs of the church, in particular, spiritual leadership, both by example in his personal life and in practice in his pastoral life.[34] This was their response to the question of priorities of specialization, which had not yet developed, but was in the process of evolving. The pastor was first and foremost to be a specialist in his own knowledge of God and exhibit the fruits of a meaningful spiritual life. His relationship with God offered him support in the rest of his ministry. To be an expert in human nature, psychology, or any other discipline, came second.

In the first quarter of the twentieth century, psychology and psychiatry came into prominence bringing a keener and broader understanding of human nature. Special attention was soon given to relating the information of these disciplines to the application of the pastor's role. Writings by such men as Washington Gladden, A.E. Garvie, C.F. Rogers, O.L. Joseph, H. Adams, and A.H. McKinney led to the conclusion that "knowledge of human nature by the pastor is an absolute necessity for effective ministerial work."[35] Two distinctions were made concerning the acquiring of this knowledge: action and thought. There are some pastors who show more practical ability while others are better off dealing with theories. Whether

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[34]Ibid., pp. 49f.   [35]Ibid., p. 54.

through practical experience or reflection, acquiring knowledge of human nature is, in either case, deemed important in the cure of souls.

Accompanying increased knowledge of human nature was an increased interest in individual case study. Often in the literature, the pastor is compared with the medical doctor, that as the doctor makes individual diagnosis of his patient's medical condition, so should the pastor make an individual diagnosis of his parishioner's spiritual life. Knowing the spiritual ills of his people as well as their individual needs, the pastor is then better able to treat the peculiar spiritual conditions of any soul. It became evident with the specialized interest in the application to individual case study, that there was a "growing concern for mental and physical characteristics and needs of the individual."[36]

The influence of psychology on counseling was consequently quickly to be related to the field of pastoral theology. In 1896 John Watson made the observation that Protestants lagged behind the "consultation approach" in their ministry as compared with the Roman Catholic's practice of confession.[37] In 1907 John H. Pattison entitled a chapter in his book, "The Minister as Counselor," thereby

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[36]Ibid., pp. 54ff.

[37]John Watson, The Cure of Souls (New York: Dodd, Mead, 1896), p. 235.

suggesting a new role for the minister as counselor.[38] The role of
the pastor began to develop further by defining the need for pas-
toral counseling in various situations, such as with the sick in
hospitals, the mentally ill, the retarded, not to overlook pastoral
calling in the homes of parishioners. "T.D. Tidwell not only saw
the importance of counseling but also suggested a method—a conference
period. He reasoned that 'The pastor cannot succeed without fre-
quent conferences with individuals and groups.'"[39] While counsel-
ing, at this point, had not reached the stage of specialization, the
importance of counseling was recognized and was being introduced
as one of the formal roles of the pastor. The writers during this
period reflected a move away from concern for systematic theory and
wrote in what they considered to be a "practical" vein, stimulated
in "hints and helps" fashion.[40]

Not only did the behavioral sciences have their impact on
pastoral theology and counseling, but there was a new sociological
awakening reflected in writings at the turn of the century. E.D.
Weigle "gave a warning with regard to the social evils of his time,"
and that the minister should be open to "these current social
problems."[42] In similar spirit Frekerick Lynch emphasized the

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[38]Goulooze, op. cit., p. 60.

[39]Ibid.   [40]Ibid., p. 61   [41]Ibid., pp. 57f.

importance of ministers having a better understanding of their com-
munity, their culture, and of their times which creates the atmos-
phere in which they must do their pastoral work. He illustrates this
by citing the spirit of his time:

> The Epicurean philosophy has a great following in our land
> . . . cities . . . and is creeping into our churches. The
> name is not used . . . The old Epicurean pagan teaching is sim-
> ply this: that life is for self-employment, not for altruism,
> service or sacrifice. Any man who lives simply for what enjoy-
> ment he can get out of life is an Epicurean . . . One cannot
> live long in the city without realizing that this philosophy of
> life has great hold upon fully half of the people in the city.[42]

Similarly, R.Z. Fahs in 1908 notes that "the habits and conditions
of the people have so changed that the preachers of today cannot
do their work as did the preachers of a past generation."[43]

These writers along with others contributed to pastoral
theology the necessity to understand man as a social being and to
be aware of man's social relations to his fellow man, his community,
his culture and his world. The church itself is a social institution
and as such has its impact not only on its individual members, but
also on the larger community of which it is a part. Other writers
of pastoral theology, such as Washington Gladden and Gains S. Dobbins
emphasized the need of the pastor to keep abreast of the times as
the order of life was in continual flux.[44] The pastor must cope

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[42]Ibid., citing Frederick Lynch, _The New Opportunities of the Ministry_ (New York: Revell, 1912), pp. 44f.

[43]Ibid., p. 58f.   [44]Ibid.

with the fluctuating social order to have a viable ministry. R.Z.
Fahs in 1908 notes that "the habits and conditions of the people
have so changed that the preachers of today cannot do their work as
the preachers of a past generation."[45] G.K.A. Bell made similar
observations emphasizing the need to bring to bear the unchanging
gospel to a changing social situation of his day.[46] Clement F.
Rogers in 1912 goes a step further beyond the concern of a changing
social order to a sociological understanding of man. Pastoral
theology, he contended, must take into account that an individual
is a social being, and that man's life consists of social relations
with others. He spoke of a need for a "purely spiritual sociology
of the church," to further assist the church and minister to better
understand the individual and to deal with the complex and multiple
problems of life.[47] These writers of pastoral theology, then, re-
flected a new sociological awareness that was developing in the
work of the pastor. Their contributions pointed to the necessity
of understanding man as a social being and to be aware of man's
social relations to his fellow man, his community, his culture, and
his world. The church, itself, is a social institution and as such
has its impact, both psychologically and sociologically, not only on
its individual members, but also on the larger community.

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[45]Ibid.

[47]Ibid.

[46]Ibid.

[48]Ibid., pp. 61f.

In this last period of pastoral theology, then, the influence of both psychology and sociology is directly felt as the knowledge gained from these fields was applied to the church, and its ministry. Goulooze calls this a period of application, as "the interest in applied psychology, the increased emphasis on the sociological approach, the detailed interest in human nature and the knowledge of individual cases gave indication of the applicatory characteristic of this period."[48]

To summarize the three historical periods of pastoral theology in America as described by Goulooze, in the first period, the beginnings of pastoral theology, there was a stress on the person of the pastor. Writers spoke of the pastor as counselor of the soul and suggested commonsense methods and pastoral intuition to give counsel to parish people. The second period was one of development for pastoral theology. Systematic works in pastoral theology appeared in which counseling opportunities were further defined and extended. New possibilities and opportunities were seen for the local parish pastor as well as recommended means and methods to accomplish these tasks. Writers benefited from the rise of psychology during the last half of the nineteenth century resulting in the increase of our knowledge of human nature and pastor's becoming aware of the importance and necessity of such knowledge. The third period

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[48]Ibid., pp. 61f.

while it reportedly brings us historically to the present, actually
brings us only to World War II. This period is basically a period
of application in pastoral theology. Trends found in previous
periods were continued and further developed. As they developed
they were marked by a special application. There was continued
emphasis on the person of the pastor with his being both a specialist
in regards to his understanding of God and a spiritual leader. The
application of psychology to the work of the pastor was further
developed as well as a keener awareness of the importance of soc-
iology to the work of the pastor. The new discoveries of psychology
led to the finding and fusing of a new pastoral psychology of the
then present age with the rich heritage of pastoral theology.

It is interesting to note that while there was a new apprec-
iation for the tremendous aid of psychology to pastoral theology in
the formulation of a pastoral psychology, the importance of sociology,
while recognized by some writers, was largely passed over by most
writers in pastoral theology in favor of psychology.

PASTORAL COUNSELING PREDOMINANTLY AN AMERICAN PHENOMENON

It was through the rise and development of psychology that
there was a growing interest in counseling which gave birth to what
has become a special discipline itself within pastoral care, pastoral
counseling. This is basically an American phenomenon. While
psychology has roots in Europe, the first half of this century
European Christianity has had the problem of defining and preserving

the uniqueness of the faith against the threatening disintegration caused by the World Wars as well as new social enemies, at one time the third Reich and today Communism. The climate of theology in Europe, consequently was and is considerably different than in our own country. Even today a German theologian, such as Thomas Bonhoeffer who is relating psychology with theology, is looked upon with some degree of suspicion by his counterparts in Germany, although in recent years practical theology is beginning to be viewed in a different light in his country because of modern psychology.

In England, in contrast to Germany, there were some writers who were quick to see the potential of relating psychology to pastoral theology and the work of the pastor. Henry Balmforth and others in An Introduction to Pastoral Theology,[49] made "in the mid-thirties a careful attempt to relate the new psychology to Anglican pastoral theology with Catholic leanings."[50] Basically, however, from an American point of view, this potential was not realized. Seward Hiltner levels the criticism of the failure of British theologians "to describe and analyze actual concrete experiences that transcend illustrations."[51] The discipline of pastoral counseling has been by and large an American phenomenon.

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[49]Henry Balmforth, and others, An Introduction to Pastoral Theology (New York: Macmillan, 1937).

[50]Hiltner, Preface to Pastoral Theology, p. 227.

[51]Ibid., p. 50.

The forces in America which contributed to a new pastoral theology out of which pastoral counseling arose are many. One major force already mentioned is the rise of general psychology in America, the importance of which cannot be overstressed. It has been noted above that the application of psychology to the work of the pastor, pastoral psychology, has been directed at relating and facilitating the approach of the pastor with the needs of persons in relation to the religious community. Psychology of religion, with its focus being to understand what religion means to persons by looking within human experience, is another development of general psychology. Psychology is also the taproot of other branches of the scientific critical approach to religion, such as history of religion and sociology of religion.[52] These areas "employ psychology to interpret the meaning of religious forms and activities, for they would otherwise be mere dusty records and lifeless patterns."[53] General psychology has been a major contributor, then, to a new pastoral theology in America.

Another major input interweaving those mentioned is religious education. This was the first movement "toward the study of actual people engaged in a form of religious activity and the attempts to

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[52]Paul E. Johnson, Psychology of Religion (New York: Abingdon Press, 1959), pp. 12ff.

[53]Ibid., p. 13.

draw basic theory out of these participant observations."[54] This

is the premise of clinical study, the development of which is still

almost unique to the United States. The one person most responsible

for pointing the way of clinical study for pastoral theology was

Anton T. Boisen, one of the founders of clinical training for the

clergy. Through his own personal struggles in life he came to the

conclusion "that certain types of mental disorder and certain types

of religious experience are alike attempts of reorganization" of

one's life.[55] Boisen emphasized the importance of studying "living

human documents." He contended that no matter how deeply disturbed

a subject was, that one was not merely studying psychology or

psychiatry, but in studying concrete forms of human experience, one

was also studying theology. What is implicit in his thesis is not

only the use of psychology by theologians but a theological method-

ology. This methodology is used in clinical training in which

pastors are not merely learning to bridge psychology and theology,

but are learning a theological methodology as well. In this process

ultimate theological issues arise while studying the experiences

of a living human document.

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[54]Hiltner, Preface to Pastoral Theology, p. 50.

[55]Charles E. Hall, Jr., "Some Contributions of Anton T. Boisen
(1876-1965) to Understanding Psychiatry and Religion," Pastoral
Psychology, XIX: 186 (September 1968), 52.

These various thrusts all contributed to the emergence of pastoral counseling as both a major discipline of pastoral care and as a major role of the pastor: the evolvement of the young modern science of psychology, its use in the study of religion and religious behavior, and the contributions by those in religious education and clinical training. The pastor had available a broader understanding of human nature and could now be provided with sophisticated tools for counseling, replacing his reliance solely on commonsense methods.

<div align="center">PASTORAL COUNSELING BECOMES A DISCIPLINE</div>

The roots of pastoral counseling reach back through the centuries to the early Christian Church. It was not, however, until about the nineteenth century that the systematic development of pastoral theology began to emerge. We have followed the development of some of its branches and are now ready to examine some of the buds as they blossom into the specialization of pastoral counseling.

When the first buds of pastoral counseling began to appear is not exactly known. A few books appeared before World War II,[56] but for the most part the new interest in pastoral counseling was manifested in the 1940 decade. Rollo May's book on counseling in 1939, The Art of Counseling,[57] was one of the earlier major books

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[56]Goulooze, op. cit., pp. 233f.

[57]May, op. cit.

written concerning the principles and practice of psychotherapy.
The book's three parts explain the "underlying principles," the
"practical steps" and the "ultimate considerations" of counseling.[58]
Being a student of theology at the time, May is sensitive to the view-
point of the religious worker with such chapters as: "Morals and
Counseling,"[59] and "Religion and Mental Health."[60]

Another important work, which again was not written with
the pastor in mind, but is a rich source book and has had a major
influence in pastoral counseling circles, is Carl R. Roger's _Counsel-
ing and Psychotherapy_, written in 1942. His basic hypothesis is as
follows:

> Effective counseling consists of a definitely structured per-
> missive relationship which allows the client to gain an under-
> standing of himself to a degree which enables him to take
> positive steps in the light of his new orientation.[61]

Pastors were quick to adopt much of what Rogers had to say as his
thesis of giving the client freedom to grow, facilitated with
gentle suggestions to point to new and broader possibilities, was
easily adaptable and congruent with the pastor's role in general.
Roger's influence is well felt as will be discerned below.

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[58]Ibid., pp. 11ff.

[59]Ibid., Chap. IX, pp. 179-206.

[60]Ibid., Chap. X, pp. 207-226.

[61]Rogers, op. cit., p. 18.

Other books to appear were The Pastor as Personal Counselor, by Carl J. Schindler in 1942.[62] In 1945 Russell L. Dicks wrote Pastoral Work and Personal Counseling[63] followed by John S. Bonnell's Psychology for Pastor and People, in 1948.[64] A year later Stanley E. Anderson wrote Every Pastor a Counselor[65] and the same year Seward Hiltner's Pastoral Counseling[66] was published. These were among some of the books as well as many articles that were published in the nineteen-forties concerning the work of the pastor as counselor.[67] Pastoral counseling, while an age-old practice, now became a formal discipline of pastoral care in practical theology and provided a new methodology and understanding of human behavior to help those with burdened and distressed souls.

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[62]Carl J. Schindler, The Pastor as Personal Counselor (Philadelphia: Muhlenburg Press, 1942).

[63]Russell L. Dicks, Pastoral Work and Pastor Counseling (New York: Macmillan, 1945).

[64]John S. Bonnell, Psychology for Pastor and People (New York: Harper & Brothers, 1948).

[65]Stanley E. Anderson, Every Pastor a Counselor (Wheaton: Van Kampen Press, 1949).

[66]Seward Hiltner, Pastoral Counseling (New York: Abingdon-Cokesbury Press, 1949).

[67]For a more complete bibliography, see Goulooze, op. cit., pp. 233ff.

TWO BRANCHES AND CRITIQUE

Each pastor in his role as a counselor brings into the counseling relationship his theological understanding of man and God as well as having a central focus from which he views all human behavior. The pastor's perspective of life is nourished from the theory which flows into it and the practice which emerges from it. Thus, each pastor brings his own uniqueness to counseling, however, many pastors may share the same perspective. This can be seen in the formative years of pastoral counseling, the nineteen forties and fifties, that two main branches were significant in forming the model that emerged in this earlier period of pastoral counseling. In this model:

> . . . five seminal ideas played decisive roles in shaping the
> literature and the approach to seminary teaching of counseling:
> (1) The formal, structured counseling interview as the oper-
>   ational model;
> (2) the client-centered method as the normative and often ex-
>   clusive methodology;
> (3) insight as the central goal of counseling;
> (4) the concepts of unconscious motivation and
> (5) the childhood roots of adult behavior.[68]

The two major influences of this model were Sigmund Freud and Carl Rogers, both pioneer counselors to whom we are indebted for opening the way before us.

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[68]Clinebell, op. cit., pp. 28ff.

Freud's view of man and life was basically pessimistic, but this does not take away from his contribution. Most important was his discovery of the unconscious mind. More accurately, according to L.L. Whyte, this major achievment was a culmination of a cultural process extending over centuries.[69] In his searchings of understanding human behavior, Freud traces the conflicting forces within the individual. Freud in his pioneering work in psychoanalysis, attempted to seek out infant and childhood roots to adult behavior as well as uncovering unconscious material that contributed to one's motivations. Freud's pessimism is revealed in his view of man as being a biological creature whose behavior is compelled by biological urges. Relationships in life are secondary in that the importance of relationships merely develop instincts in a certain way. Man, then, is more or less at the mercy of his instincts, which "push" him through life. Freud also viewed man as essentially irrational. Irrational forces in the unconscious can control and even trick man's rational side. Critics label Freud as a pan-determinist and that he undercut man's ability to be responsible. Also many aspects of human behavior that Freud attributed to instincts are now found to be cultural conditioning. Important aspects of the earlier model of pastoral counseling are readily seen from Freud's view of human

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[69]L.L. Whyte, The Unconscious Before Freud (New York: Doubleday, 1962).

behavior and his development of psychoanalysis. The setting of
psychoanalysis was a formal, structured interview and procedure.
The methodology was largely one of uncovering intra-psychic con-
flicts, unconscious motivations, repressed experiences in childhood
with the hope that increased awareness and insight into the roots
of one's problems, accompanied with the resolution of some past
conflicts that one would be better able to increase his conscious
control over troubling urges that well up from within one's uncon-
scious. These concepts and practices were taken over in the earlier
model in pastoral counseling.

The other counseling pioneer, who has also greatly influenced
pastoral counseling is Carl Rogers. His earlier contribution was
what he called "non-directive counseling" which he has revised to
"client-centered therapy" to bring the focus on the person at the
center.[70] The theoretical framework from which he begins in his
understanding of man is strongly perceptual or phenomenological in
nature. Of the many postulates and assumptions of this position,
there are at least three major ones.

The first is that all behavior, without exception, is com-
pletely determined by, and pertinent to, the perceptual field of
the behaving organism. By the perceptual field is meant the entire

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[70]Carl Rogers, Client-Centered Therapy (Boston: Houghton
Mifflin, 1959).

universe, including one's self, as it is experienced by the individual

at the instant of action. Rogers says, "I do not react to some

absolute reality, but to my perception of this reality. It is

this perception which for me is reality."[71] Secondly, the assumption

is made that the basic need of all human beings is to achieve

self-adequacy; i.e., all behavior is seen as an attempt to maintain

his concept of selfhood and to make it more adequate. Thirdly,

man is a self-actualizing creature. Man acts in accordance with his

perceptions. This, in fact, is the goal of Rogers' counseling:

"The organism has one basic tendency and striving--to actualize,

maintain, and enhance the experiencing organism. . . . The organism

actualizes itself in the direction of greater . . . independence

and self-responsibility."[72]

Rogers' view of human behavior is one of a self-contained

and self-sufficient organism in which every individual exists in a

private world of his own experience; e.g., his view of reality.

This view

> is graphically portrayed by Rogers in the figure of two circles,
> one of "Self-Structure" and other of "Experience." At the
> beginning the margin of their overlapping is small, but as the
> counseling proceeds one recalls and integrates more of his ex-
> periences, until the two circles more largely overlap.[73]

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[71]Ibid., p. 484.   [72]Ibid., pp. 487f.

[73]Paul Johnson, Person and Counselor (New York: Abingdon
Press, 1967), pp. 92f.

Paul Johnson rightly levels the criticism of this point of view that

> what is missing here is the other person and the world beyond
> the self. The aim of this therapy is to enlarge the self, yet
> in unreal isolation, as if he were not involved with other
> persons in the surrounding world.[74]

This does not mean that Rogers down plays the significance of the interpersonal relationship in counseling, but that his goal in therapy, as stated above, is to free the individual from dependent attactment with other persons—to allow the individual to actualize himself toward a greater degree of independence.

Rogers' view of man, in contrast to Freud's, is far more optimistic in that man has the capability to control his behavior and can actualize himself. Man's ability to be responsible is supported by Rogers. While very much aware of the many forces operating on man in his world, overall Rogers' view of man is oriented in an individualistic direction.

Rogers' "Client-centered Therapy," as Clinebell has observed, became "the normative and often exclusive mehhodology" of this earlier model of pastoral counseling.[75] His methodology is non-directive to facilitate emotional catharsis, with the counselor listening, avoiding advice, reflecting, giving inspiration and teaching in the counseling relationship. In the process the troubled person

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[74] Ibid., p. 93.

[75] Clinebell, op. cit., p. 28.

unloads his feelings, lightening his burdened soul, and, thereby, is enabled to broaden his perspective to facilitate insight. Insight is central to the Rogerian goal of counseling. The client's struggle basically revolves around his denial or distortion of his "total organismic experiencing." Insight clarifies the distortion and the individual can then change his behavior to enhance self-actualization.

Being a pioneer in counseling, Rogers has been very influential in his field. Pastors found his client-centered method to be a good correction to those in authority-centered traditions, who tended to be overdirective and many more were comfortable with his relatively passive approach. To adopt his methodology, however, one implicitly, if not explicitly, also adopts his understanding of man. Rogers' influence was profound in the development of contemporary pastoral counseling. His influence contributed to the furthering development of the individualistic root that existed in the heritage of pastoral counseling at the expense of dealing with the relationship of sociological and environmental influences on the individual to his inner problems. This individualistic orientation still casts its shadow over pastoral counseling today with its private one-to-one counseling methodology. While this contribution is important in the development of pastoral counseling, it is too limiting and narrow for a more complete viable model of pastoral counseling today.

The theories of Freud and the earlier theories of Rogers, then, were basically the main theories that pastoral counselors vigorously modified to evolve the older model of pastoral counseling. These pioneers' influence is still felt as represented by writers such as Leslie E. Moser,[76] the Reverend E.F. O'Doherty and Dr. S. Desmond McGrath,[77] and by the Reverend Michael J. O'Brien.[78] Moser, for example, has one chapter entitled "Psychoanalytically Oriented Therapy and the Religious Worker" and another entitled "Client-centered Therapy."[79] O'Doherty and McGrath are greatly influenced by Freud and psychiatry, while O'Brien's work is very Rogerian—even borrowing Rogers' terms as subtitles in his chapter on pastoral counseling.[80] So while some pastoral counselors have presented newer models for pastoral counseling, such works as mentioned still

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[76]Leslie E. Moser, Counseling (Englewood Cliffs: Prentice-Hall, 1962).

[77]E.F. O'Doherty, and S. Desmond McGrath, The Priest and Mental Health (Staten Island: Alba House, 1963).

[78]Michael J. O'Brien, An Introduction To Pastoral Counseling (Staten Island: Alba House, 1968).

[79]Moser, op, cit., Chaps. 7 & 8, respectively.

[80]O'Doherty, op. cit., Chap. 4: "A General Approach for Pastoral Counseling." In terms of personality development O'Brien is influenced by both Freud and Gordon Allport.

support the older model. This is not to say that this model has no

continuing validity or usefulness, only that it has limitations of

which we ought to be aware.

NEW DEVELOPMENTS

While one profession cannot be a model for another, pastors

were quick to begin working with the knowledge laid forth by the

pioneers in counseling. The leaders in pastoral counseling, such as

Seward Hiltner, Wayne Oates, Howard Clinebell, Paul Johnson, Carroll

Wise, Helje Faber, among many others, were and are vigorously mod-

ifying the theory of the secular counselors for utilization by pastors

as spiritual counselors.

Seward Hiltner contributed a clear view of pastoral counseling

with his two-pronged, theological and psychological perspective.

His theological view of the pastor's role is one of shepherding--

the content of which is healing, sustaining, and guiding.[81] Shep-

herding is "not merely in the attitude and intention of the pastor,"

but is a combination of attitudes in pastor, parishioner, and the

relationship between them.[82] Shepherding, then, forms the theological

theory for the operations of both the pastor and the church. His

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[81]Seward Hiltner, *The Christian Shepherd* (New York: Abingdon
Press, 1959).

[82]Hiltner, *Preface to Pastoral Theology*, p. 69.

psychological perspective is educative counseling, "emotional re-education"[83] in the sense of "educatively" assisting the individual to develop his insights from within his own field of experience.

Hiltner has matured in his own thinking as well as bringing pastoral counseling as a discipline along with him. In his first attempt to define pastoral counseling in a work by the same title (1949), he spoke of pastoral counseling as the pastor's "focus of function."[84] By this phrase, he refers to the pastor's role and his faith as they contribute to his unique identity. A little over a decade later Hiltner (1961) summarized and defined the pastor's distinctiveness in terms of what Hiltner called "context." The context or distinctive identity of pastoral counseling consists of four factors: 1) the setting in which the pastor carries on his counseling, namely the church and everything it symbolizes, 2) the expectations parishioners bring to the pastor's office or person, 3) a shift in relationship which creates "out of a previous, general pastor-parishioner relationship a special and temporary relationship . . . with the recognition that, upon conclusion of a special and temporary relationship, the general relationship will be resumed, 4) the distinctive aims and limitations of the pastor in counseling,

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[83]Hiltner, Pastoral Counseling, p. 19. See also p. 255.

[84]Ibid., pp. 118f.

the aim is "total redemption" of the "total person," and the limit-
ations being time, training, and skill.[85]

Basic to the whole of Hiltner's thought is the influence of
field theory,[86] with its emphasis on the interrelationship of all
forces in a field which form an ordered totality at any given time.
The organizing core of any given field is the focus, whatever it
might be. The field is fluid and dynamic, changing as a new force
becomes the focus and thus dominates the field of the individual.
In terms of human behavior and relationships this means that one must
evaluate the relevance of any new datum or act according to its
relation to the existing focus rather than to some preestablished norm

Hiltner has been and is sensitive to the contributions of
the behavioral sciences and is bringing theology and psychology into
conjunction as each sheds light upon the other. His view of man
stands in contrast to the determinism of Freud and the elementaristic
assumptions of behaviorists with his dynamic phenomenological under-
standing of man, which field theory suggests. While field theory
opened doors to a more dynamic understanding of man and was particu-
larly helpful in studying groups, it did not go far enough. In
the end the field-theoretical approach addressed itself to the

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[85]Hiltner, _The Context of Pastoral Counseling_, p. 32.

[86]Hiltner, _Preface to Pastoral Theology_, pp. 57ff, 99ff,
110ff, 176 & 211ff.

problems of organization within the individual rather than within the collectivity. While it made possible great progress in social psychology, in such areas as perception and cognition, its "primary contribution has been to give us a more adequate, sophisticated psychology of groups because its basic theoretical position is the psychological field of the individual."[87]

Hiltner is to be praised for his many contributions of bringing theology and psychology into conjunction. In terms of pastoral counseling he has brought us far in our understanding and practice of one-to-one and samml group counseling and relationships. Through his field theory approach he has biven us a more sophisticated psychology of the individual. His educative counseling orientation with its emphasis on the phenomenological principle of getting inside the other's frame of reference is a major contribution. His primary focus clearly is on the individual and the counseling relationship with a much lesser emphasis on sociological and environmental forces upon the individual. The collective is mentioned only in relationship to the church. The emphasis is on the individual and ministering to or counseling the individual. His model of pastoral counseling tends to support the existing individualistic model of pastoral counseling. This cricicism is made only in light of recent

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[87]Daniel Katz & Robert Kahn, The Social Psychology of Organizations (New York: Wiley, 1966), p. 3.

developments in community psychology, recognizing that Hiltner's model was forged before community mental health thinking came to the forefront. Nevertheless ministering to unhealthy social structure, which are forces that also contribute to individual problems, is now recognized to be as important and little attention is given to this in his discussion of pastoral counseling. Pastoral counseling can no longer continue its relationship with psychology with the neglect of sociology and other social sciences.

In contrast to the subjectivity of Hiltner's educative counseling is to view pastoral care and counseling from a more objective, theological perspective as do many European theologians. Hiltner, himself, agrees with Heije Faber[88] of the University of Leyden in his critique of pastoral care and clinical pastoral education in the United States, when Hiltner states, "While appreciative of our developments (in these areas) . . . he is rightly critical of our lack of theological orientation about them."[89]

Eduard Thurneysen is one who gives a more objective, theological model for pastoral care. A one-time associate of Karl Barth, he views pastoral counseling as proclamation. The counselor is to be a channel through which the Holy Spirit can speak. The truth is

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[88]Heije Faber, _Pastoral Care & Clinical Training_ (Arnhem: Van Loghum Slaturus, 1961).

[89]Seward Hiltner, "The Contribution of the Behavioral Sciences to Pastoral Care & Counseling," _Princeton Seminary Bulletin_, LXII:3 (Autumn 1969), 37.

of God in judgment, forgiveness, and grace. Thurneysen would dis-

trust any approach which hopes to find truth within man and thus

would stand to sharp contrast to Hiltner. While Thurneysen would

see the need of psychology by pastoral care to help in the under-

standing of man, we can never know enough about man. In his view

there is no equality between psychology and theology.

> for psychology is ancillary and phenomenological with no auth-
> ority to make declarations beyond descriptions of man's inner
> being. . . . The true pastoral counselor is always a translator
> of the Word. . . . We shall really understand man only when we
> understand him from the Bible. There is disclosed what man is
> and what no psychology is able to disclose by itself: man's
> misery and man's greatness. . . . The word of God is not one
> source of knowledge among others; it is the basis of all know-
> ledge even in the matter of understanding man.[90]

Thurneysen's theological orientation is clear in his wholly-

other objectivity of God's word to man. While, on the one hand, he

is deductive in contrast to Hiltner who is educative in approach, as

well as different in so many other points of view, his model of

pastoral counseling, on the other hand, is like Hiltner's in that it

tends to be individualistically oriented.

In terms of approach to pastoral counseling, Wayne E. Oates,

an American, is in many respects similar to that of Thurneysen as he

too views pastoral counseling as "an adventure in pastoral theology."[91]

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[90]Eduard Thurneysen, A Theology of Pastoral Care (Richmond:
John Knox Press, 1962), pp. 202, 205f, 210.

[91]Wayne E. Oates, Protestant Pastoral Counseling (Phila-
delphia: Westminster Press, 1962), p. 24.

He says,

> We need now to examine critically the pastoral task of the
> minister in the light of the internal Protestant principles
> which have given dynamic and direction, warmth and compassion,
> to Christian pastors in every age who have taken these prin-
> ciples seriously and sought to focus them upon their encounters
> with people in need.[92]

He focuses on four salient Protestant Principles and their meaning,

purpose and function for the pastoral counselor. These principles

are:

> 1) the sovereign Lordship of Christ; 2) the responsible dialogue
> between God as Creator and man as creature; 3) the consecration
> of life and the priestly vocation of every believer; 4) the
> release from the bondage of self-justification into the freedom
> of the justification of the believer by faith."[93]

Oates' approach is decuctive, beginning with theological categories

for implications for pastoral counseling. He also views counseling

in terms of one-to-one personal relationship between pastor and

parishioner, which, as stated, does not go far enough today.

Paul E. Johnson, another pioneer in pastoral counseling,

presented a model of pastoral counseling in which the counselor is

"mediator"[94] and his approach is "responsive counseling."[95] The

role of mediator is both theological and psychological. Theologically

the pastor ministers in a loving community. "Even as Christ offered

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[92]Ibid.   [93]Ibid.

[94]Johnson, Person and Counselor, pp. 70ff.

[95]Ibid., pp. 74ff.

himself as mediator between God and man and between man and man; so
the pastor brings a mediating spirit into the world of conflict
seeking a reconciling love. This ministry is known today as pas-
toral counseling."[96] Psychologically Johnson's "responsive counsel-
ing" approach is a mediating position between that of Hiltner's
educative approach from within man and Oates and Thurneysen's deduc-
tive approach of revelation from outside of man.

> There is danger we may fall into one trap or the other of author-
> itarian or permissive counseling; and either extreme will under-
> mine effective growth by paralyzing initiative or responsibility.
> Responsive counseling calls forth both initiative and respon-
> sibility by mutual participation in true dialogue. The coun-
> selor needs to relax authority enough to participate as a fel-
> low searcher who actively undertakes to learn and grow with
> the person. Yet the counselor cannot afford to abdicate his
> authority if he is to engage the person in direct encounter and
> awaken his initiative to call forth dormant potentiality. This
> counseling dialogue explores the meaning of life in our personal-
> social-spiritual context by responding to the challenge of
> each situation in the active voice of a person who decides to
> be responsible.[97]

Central to Johnson's perspective is the human relationship
which is dynamic both within and between persons. Wholeness in life
is dependent upon the give and take through meaningful relation-
ships.[98] Mental illness is loneliness which can either be estrange-
ment of man from himself or from others.[99] He is clear in his

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[96]Ibid., p. 71.

[97]Ibid., pp. 107f.

[98]Ibid., p. 154.

[99]Ibid., pp. 154f.

emphasis that "only a person can heal person-hurt,"[100] and this

becomes central in his model of pastoral counseling, that healing

takes place in an interpersonal relationship of reconciling love.

Johnson's approach tends to lend support to the one-to-one

pastoral counseling model. While he may not have realized it, he

was moving in the direction we are suggesting in this dissertation,

to move beyond the limits of a one-to-one approach. He is aware of

the problem of being individualistically oriented and does speak of

the need that man be in a community of mutual respect and concern

in which he can confess his need and seek help. He speaks of mental

health being "people caring for people . . . and is the growing

fruit of a community where persons accept and love and trust each

other."[101] He goes further to say that this is the primary concern

of the church and that the "role of the church is to infuse the whole

human community with spiritual resources of hope, faith, and love."[102]

"If the church is a living community of faithful love, it will bring

new life to the entire community of man."[103] While we are in com-

plete agreement with what Johnson says, more needs to be said. The

goal and ideal of both mental health and the church are stated, but

the role of pastoral counseling is responding to the individual and

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[100]Ibid., p. 161.

[101]Ibid., p. 166.

[102]Ibid., p. 168.

[103]Ibid., p. 169.

mediating his acceptance in the community as well as helping him to
feel accepted. While very necessary and important, we see this posi-
tion as more of "picking up the pieces" to the neglect of ministering
to th... e social structures and institutions which tend to create the
estrangement and loneliness Johnson speaks of—social structures
which are also very human in nature. This would be an act of pre-
vention, preventing mental illness, which we believe should
become part of the function of pastoral counseling and ministry.
What we are suggesting is that pastoral counseling not only help
bring man into community, but focus its concern to change also those
aspects of the community itself which work to dehumanize man. Con-
sequently, our ministry will be preventive in nature and subsequently
will be reducing the need to recounsel those who fall back because of
not being able to cope with the dehumanizing forces in society.
Johnson has moved a step in this direction when he speaks of the
responsive counselor mediating the interacting forces and persons,
seeking to reconcile and unify them. He listens and will mediate
the conflicts, separations, and fragmentations into the integrity
of interrelating wholeness.

We would add two further considerations to Johnson's view of
the pastoral counselor being responsive and a mediator. First, his
concept of mediator could be expanded so that a layman could be the
mediator between the pastoral counselor and the counselee, which
places the counselor as a consultant who only indirectly deals with
the counselee. This triadic model of counseling opens many doors

when thinking in terms of community mental health. Secondly, we would further suggest that more than simply responder, and mediator, the pastoral counselor also must be a shaper--to help shape some of the interacting forces within a community, such as attitudes, values, events by involvement in church, community organizations, political groups, educationsl system, boards of agencies, and so forth.

Wayne Oates moved a step in this direction when he pointed out the importance of the covenant community in counseling. The pastor is one arm of the church and through his counseling activates the whole purpose of the church, "In a very real sense, the church is the counselor."[104] He rightly speaks of the importance of the church to be a healing community for the individual. He stops short, however, as he does not speak of a ministry to the church community, itself, to help make it a healing community. The next step would be to minister to other social structures so they too facilitate healing. Oates' focus, in this sense, is still individualistic.

NEW DIRECTIONS IN MENTAL HEALTH

In a 1955 Joint Commission on Mental Illness and Health was appointed by Congress. In December 1960 it presented the final report now published in a book titled Action for Mental Health.[105]

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[104]Oates, op. cit., p. 117.

[105]Joint Commission on Mental Health and Illness, Action for Mental Health (New York: Basic Books, 1961).

This report reflects the beginnings of the current revolution in mental health with the concept of community mental health, as well as, presenting for the first time a comprehensive national strategy towards meeting the unmet needs in the mental health field. Based upon this report President Kennedy in 1963 recommended to Congress a shift of federal monies from outmoded large state institutions to a new concept of comprehensive community mental health clinics or centers, oriented to meet and serve all mental health needs of a given community. This does not merely reflect new concepts in treatment, but new understandings of man and mental health. Man and his behavior cannot be understood from only one point of view, such as psychology, but must include sociology, anthropology, theology, plus other disciplines.

Again we have leaders in pastoral counseling who are developing and working with these concepts and modifying them for the use of the church and her pastors. Robert Bonthius in 1967 published an article entitled, "Pastoral Care for Structures as Well as Persons,"[106] which awakened in many involved in pastoral counseling the possibility of new horizons. He said it was not enough to be psychologically oriented, but that pastoral counselors need to be sociologically oriented experts as well. Slowly other articles in

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[106]Robert Bonthius, "Pastoral Care for Structures as Well as Persons," Pastoral Psychology, XVIII:174 (May 1967), 10ff.

similar vein have appeared such as "Community Organization and Pas-

toral Care: Drum Beat for Dialogue" by Peggy Way,[107] and "Pastoral

Counseling in the Context of Social Action" by Robert M. Collie.[108]

Pushing forward in this direction is the most published

pastoral counselor in recent years, Howard J. Clinebell, Jr. In

1966 in his book, Basic Types of Pastoral Counseling[109] he suggests

a new model for pastoral counseling. The old model as he suggests,

viewed man basically as man-apart-from-his-relationships with emphasis

on intrapsychic conflicts, uncovering these conflicts, seeking out

unconscious motivation for behavior with insight as the goal of coun-

seling. The new model he suggested viewed man as man-in-relationship

with an emphasis on improving relationships through support and there-

by cope with the present, plan for the future, thus being much more

action oriented and flexible as goals in counseling. Pastoral coun-

seling is still seen as one-to-one and small group process, still

very psychologically oriented. His newer model was very open and

fluid, being quite eclectic in therapeutic approaches to counseling,

depending upon the counselee, situation, setting, time and the

training of the counselor.

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[107]Peggy Way, "Community Organization and Pastoral Care:
Drum Beat for Dialogue," Pastoral Psychology, XIX:182 (March 1968)
25ff.

[108]Robert M. Collie, "Pastoral Counseling in the Context of
Social Action," Pastoral Psychology, XXI:207 (October 1970), 45ff.

[109]Clinebell, op. cit.

In another work, <u>Mental Health Through Christian Community</u>,[110]
Clinebell is sensitive to the importance and therapeutic possibilities
of the Christian community. "Mental health," he says, "is a central
and inescapable concern of any local church that is a healing-
redemptive fellowship. A local church today has an unprecedented
opportunity to multiply its contributions to both preventive and the
therapeutic dimensions of mental health."[111] Recognition is given to
the importance of a community, in this case a local church, and its
effect upon the mental health of people. He took the next step
beyond Oates' contribution by suggesting how positive mental health
can be promoted and facilitated in all the various aspects of the
life of a congregation. Promoting mental health through the ac-
tivities of the church is clearly a preventive measure of mental ill
health. However, it is not clear at this point how much emphasis he
placed upon prevention and its place in the role of the pastoral
counselor. The criticism might be raised that while he viewed pre-
vention in terms of ministry, he still viewed pastoral counseling
itself in individual terms of a "pick-up-the-pieces" orientation as
well as that niche for psychology in relationship to mental health
within the church.

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[110]Howard J. Clinebell, Jr., <u>Mental Health Through Christian
Community</u> (New York: Abingdon Press, 1965).

[111]Ibid., p. 13.

Clinebell took a step further to widen the horizons of pastoral counseling when he joined with Harvey Seifert in an interdisciplinary approach for a broader understanding of the basic dynamics of growth and change in their book, Personal Growth and Social Change.[111] From their respective specializations in pastoral counseling and care, and Christian ethics and sociology, their goal was to help ministers and laymen to become more effective change agents. This was a most important step for pastoral counseling as it began to point out the need of pastoral counselors to deal with the malignancies and forces of social structures as well as intrapsychical and interpersonal problems and dynamics. To be a change agent of social forces is gaining recognition to be as important as dealing with the psychological dynamics in improving the well-being of an individual. This view of man as man-in-relationship becomes more inclusive in its understanding of relationship to include man's relationships with other men, but also man's relationship to his environment, both physical and social. This "relational psychology" of seeing man's wholeness as the aliveness of his relations with himself, others, and God, is in addition, beginning to take more seriously man's relationship to his cultural milieu, social insiitutions, social forces and pressures, community, all of which also affect his wholeness.

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[111] Howard J. Clinebell, Jr., and Harvey Seifert, Personal Growth and Social Change (Philadelphia: Westminster Press, 1969).

The understanding of man has changed as the science of psychology has advanced as well as being in dialogue with other disciplines. This is not to say that earlier views lacked truth, but rather shows greater appreciation for the complexity of man. Psychoanalysis and depth psychology viewed man essentially as man-apart-from-his-relationships. Then the view of man-in-relationship emerged, to which Clinebell holds in his revised model of pastoral counseling. In his latest publication, Community Mental Health: The Role of Church and Temple,[112] Clinebell as editor, reflects the emerging mood of community psychology and suggests that man-is-his-relationships.

> Alongside Freud's will-to-pleasure, Adler's will-to-power, and Frankl's will-to-meaning, is another, more basic human striving and need—the will-to-relate. Man is his relationships; (underlining mine) the quality of his relationships determines the quality of his mental-spiritual health. Only through relationships can he satisfy his will to pleasure, power or meaning. When one is blocked in the ability to relate in mutually satisfying ways, alienation, loneliness, rage, and sickness (mental and physical) follow.[113]

The anthropological question, "What is man?" is perhaps the most important question we face today. To suggest that man-is-his-relationships "illuminates the importance of relationship-centered approaches to pastoral care and counseling,"[114] which is central to Clinebell's model of pastoral counseling.

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[112]Howard J. Clinebell, Jr. (ed.), Community Mental Health (New York: Abingdon Press, 1970).

[113]Ibid., pp. 48f.   [114]Ibid., p. 49.

In terms of pastoral counseling, what is understood by relationship? The model by and large is a dyad with pastor as counseler and client as counselee. Perhaps the numbers involved are expanded by couples, family members, or small groups, yet counseling is understeed as a direct dyad relationship between counseler and counselee. As will be suggested below, this understanding of the counseling relationship needs to be expanded to include a triadic model of counseling which includes the ceunseler, a mediator, and the person being helped.[115] This triadic model lends itself to a community mental health cencept in which changing one's environment will facilitate behavioral changes within the individual. From the area of pastoral counseling, emerges a perspective for ministry.

Another key cencept of community mental health is prevention as well as treatment. It is obvious that the old model of counseling evolved because people needed to be treated. John Snyder depicts pastoral counselors as those at the foot of a cliff helping those who stumbled off.[116] The bold new approach to mental health through a comprehensive community mental health program, includes the concept of building fences (prevention) at the top of the cliff was suggested to accompany treatment. Along this line Clinebell devotes one section

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[115]Roland G. Tharp and Ralph J. Wetzel, _Behavior Modification in the Natural Environment_ (New York: Academic Press, 1969), pp.46ff.

[116]Clinebell, _Community Mental Health_, pp. 77f.

of his last book to "The Church's Role in Prevention." This is a giant step in blazing a new road to leave behind the crossroads in pastoral counseling that was mentioned above. The direction is made known, but our way is yet to be cleared by the pioneers of community mental health.

Pastoral counseling has come a long way from the days of commonsense approaches in working with people. Pastoral counseling emerged into a discipline because there was great need for help as well as the need for pastors to be better equipped to offer it. We know today that there will always be those who fall off or are pushed off the cliff and will be in need of counseling. But can we not intervene before it is too late? The question is through which end of the telescope do we look. The old model always looked through the large end of treatment and tried to visualize some form of prevention, but it always appeared too far away. Community mental health suggests we look through the other end of prevention to look at treatment. It is not really a matter of either/or, but rather a matter of emphasis. Clinebell has begun to turn the telescope around. If we are to proceed very far beyond the present crossroads to community mental health, we must begin to look at treatment through the lens of prevention.

CHAPTER II

COMMUNITY MENTAL HEALTH:

A MODEL FOR PASTORAL COUNSELING

In the past decade, community mental health has become both a catchphrase for innovation in the mental health field as well as a descriptive phrase of a current revolution in the science, care, and development of man. "Social psychiatry," "community psychiatry," "community psychology," "community mental health" are ways of referring to the fact that sociological thinking is increasingly permeating the mental health field. The nation was stimulated into a growing realization of new directions of mental health care in the 1961 report of the Joint Commission on Mental Illness and Health, Action for Mental Health.[1] A "bold new approach" was outlined by President John F. Kennedy to Congress in February 1963, which stimulated legislative support for a major development of far-reaching, comprehensive services for the mentally ill and retarded.

Community mental health can be viewed as an approach in which greater emphasis is placed upon the interrelations between the individual and the community in which he lives. The individual and his emotional disturbance can no longer be viewed in isolation, but require a broader understanding of the environmental or community

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[1] Joint Commission on Mental Illness and Health, Action for Mental Health (New York: Basic Books, 1961).

factors which also play a part. Likewise, the individual cannot be treated in isolation. His treatment requires the utilization of a broad range of community agencies and caretakers. This change in orientation has led to the participation of such diverse agencies as public health, welfare, rehabilitation, urban planning, police departments, schools, and a wide range of mental health clinics, hospitals, and community centers. It has involved both professionals and nonprofessionals, ranging from the usual hospital staff of psychiatrist, psychologist, social worker team to the increased utilization of local physicians, public health nurses, rehabilitation counselors, educators, pastors, neighborhood aides, and even parents. The movement has also involved a wider range of social scientists from social psychology, sociology, anthropology, and public health.

Community mental health has, therefore, become a term which refers to a wide range of activities around the problems of mental health, and carried out in the community, i.e., in the places in which people carry on their daily lives.

The mental health professions are beginning to turn away from the more traditional theoretical approaches and are developing a broad-gauged, community orientation. The focus is upon mental health and not merely upon mental illness, which means there is an increasing concern for many aspects of human welfare, behavior, and fulfillment. Accompanying this new focus is a greater emphasis upon preventive measures, methods of coping, community organization and style of behavior in groups, as well as research into

ecological factors which may play a role in the enhancement or reduction of mental health.

While the community mental health movement is quite young, the impetus developed from Federal government support has seen marked increase in the number of community mental health programs. The broader participation by the citizens of local communities is just beginning to play a major role in the definition of plans and the justification of programs and services in our communities. We are in a new era, one where solid research and evaluation to support our planning and program development are still at a primitive level, but nevertheless, we have turned a corner in the mental health field.

THE THIRD MENTAL HEALTH REVOLUTION

Nicholas Hobbs identifies three mental health revolutions.[2] The first may be identified with Philippe Pinel in France, William Tuke in England, and Benjamin Rush and Dorothea Dix in America. In America Benjamin Rush in 1783 began a life of work which approached mental illness scientifically to understand and treat it. He was apparently the first physician in the U.S. to do so, and subsequently began the organic tradition in psychiatry.[3] This was a

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[2] Nicholas Hobbs, "Mental Health's Third Revolution," American Journal of Orthopsychiatry, XXXIV (1964), 822-833.

[3] N.D.C. Lewis, "American psychiatry from its beginnings to W.W. II," American Handbook of Psychiatry (New York: Basic Books, 1959), I.

heretical notion as the general climate of opinion held that insanity was virtually incurable and thus did not warrant serious attention or work.[4]

Dorothea Dix entered the national scene in 1841 to provide a major re-examination for a redefinition of insanity by the lay public. Up to this time, asylums were privately funded and existed only for the wealthy. Having visited a house of correction and finding mentally ill people chained to the wall, Miss Dix set about emphasizing insanity as a social problem. Treatment institutions for the poor would require funding from public moneys. She, in fact, blamed society for almost all insanity and held it responsible for its victims, the mentally ill. Through her extensive efforts came the establishment of our earliest state mental hospitals.

The movement to reform the care of the mentally ill was carried forward by Clifford Beers whose book, The Mind That Found Itself, caught the attention of and was supported by several eminent men of the day, including Adolph Meyer and William James. Together a formal citizens organization was formed (now called the National Association for Mental Health) to be a pressure group oriented to educating the public and stimulating action to solve the problem of mental illness.

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[4]N. Dain, Concepts of Insanity in the United States, 1789-1865 (New Brunswick: Rutgers University Press, 1964).

Though this first revolution in mental health is nearly two hundred years old, it is far from being completed. One of the major theses of <u>Action</u> <u>for</u> <u>Mental</u> <u>Health</u> is that the mentally ill do not get adequate care because they are unconsciously rejected by family, neighbor, and professional alike.[5] While an oversimplification, the fact that there are still practices to support the Joint Commission's report indicates that the work of Rush and Dix is not yet done.

The second mental health revolution focuses around Sigmund Freud, who gave birth to psychoanalytic concepts. Man was slow to accept the emerging idea that the behavior of the insane was on a continuum with so-called normal behavior. Perhaps Freud's greatest contribution to the development of intellectual thought was that he clearly viewed all men as subject to the same forces, biological and experimental, and thereby paved the way for the readmission of those with severe mental illness to the human race. He viewed mental illness as a lifetime of experiences which contributed to ultimate disorder. His work served to refocus the attention of the helping professions, so that their interest and activities began to encompass not only the psychotic, but the less seriously disturbed neurotic as well. It must be said that Freud was a giant who stands beside Darwin, Marx and Einstein in shaping our culture and our beliefs about man. His psychoanalytic ideas flourished in this country and found

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[5]Joint Commission, op. cit., Chapter III.

their way not only into clinical practice but also into such diverse

areas as literature, advertising, the arts, television, and even

jokes of the day. In terms of the laymen's understanding of mental

illness, this has been an important development in the popularization

of the belief that all men are subject to similar dynamic forces

and are equally vulnerable. One consequence of greater acceptance

of this notion has been the growing demand for mental health ser-

vices, particularly intensive one-to-one psychotherapy for the

less seriously ill.

The third mental health revolution is described by Hobbs as

a counterrevolution to the pendulum swinging too far in Freud's

psychoanalytic direction.

> A counterrevolution is required to restore balance and common
> sense. Freud has led us to a preoccupation with the intrapsychic
> life of man . . . (preoccupied) with the world inside a man's
> skull, with the unconscious, the phenomenal, the stuff that
> dreams are made of. Everyone must become a therapist, probing
> the argument of insidious intent, stalking ragged claws scut-
> tling over the bottoms of silent seas . . . The psychologist
> lays down his diagnostic tools, forgets research and gets be-
> hind a desk to listen. The social worker goes inside and waits
> for the patients to come. The preacher takes to his study
> and the teacher to the case conference. The most thoroughly
> trained person of all, the psychiatrist who has completed
> psychoanalytic training, becomes a monument of Veblenian
> inutility, able to treat maybe a hundred patients in his entire
> professional career.[6]

While a large debt is due to Freud, the third revolution, the com-

munity mental health movement, is shifting our focus from the

intrapsychic life of man to the person-in-community. This new

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[6]Hobbs, op. cit., p. 824

movement cannot be identified with any one person, but there are

evidences of a deep-running change such as the open mental hospital,

the therapeutic community,[7] the increased interest in children, the

broadened base of professional responsibility for mental health

programs, the search for new sources of manpower, and the evolvement

of comprehensive community mental health centers across our country.

Accompanying this shift in focus is a change in the understanding of

mental health, which in turn means a step away from the clinical

model of mental health that has been developed and alluded to in

the above quote.

Mental health used to mean its opposite, mental disease; now

it means not just health but human well-being.

> The revolution of our time is manifested not only in changed
> practices but more consequentially in changing assumptions about
> the basic character of mental disorders and of mental health.
> A great stride forward was made when aberrant behavior was
> recognized not as madness, lunacy or possession by a devil but
> as an illness to be treated like other illnesses; A perhaps even
> greater stride forward may result from the growing recognition
> that mental illness is not the private organic misery of an
> individual but a social, ethical and moral problem, a respon-
> sibility of the total community.[8]

The pendulum began to swing this new direction immediately

after World War II when the citizens and professionals became very

aware of the great need, as well as the limited resources available

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[7]Maxwell Jones, The Therapeutic Community (New York: Basic
Books, 1953).

[8]Hobbs, op. cit., p. 825.

in mental health care. Congress in 1946 passed the National Mental
Health Act to meet this need. Monies were made available for the
training of professional personnel in all the helping fields. Sev-
eral years later the National Institute of Mental Health was created.
It became evident in a few years that a comprehensive and critical
analysis of the mental health scene was necessary. Congress again
responded with the Mental Health Study Act in 1955, which established
a Joint Commission on Mental Illness and Health to " . . . survey
the resources and to make recommendations for combating mental ill-
ness in the United States."[9] The Joint Commission gave its final
report to the President and to Congress in December, 1960. It was
subsequently published in a book entitled Action for Mental Health,[10]
which gave the first comprehensive national survey of the needs and
resources in mental health as well as a blueprint towards meeting
the vast unmet needs. It was upon this report that President John
F. Kennedy in 1963 in a message to Congress based his new bold
approach to mental health services in our country. He called for the
federal government to support a new concept in mental health,
the comprehensive community mental health center or service. He
declared that the old concept of large state mental hospitals was
outmoded. Further, we can no longer neglect the mentally ill and the

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[9] Joint Commission, op. cit., p. V.

[10] Ibid.

mentally retarded. The President was personally responsible for in-

itiating a forceful push forward thrusting us formally into the third

revolution of mental health history.

Two contemporary books, the results of which were highlighted

in the Joint Commission report, tell what the third mental health

revolution must accomplish. The first book, <u>Social Class and Mental

Illness</u>,[11] is often quoted; however, not for its central point, a

point so startling and so revealing of the character of much of our

current mental health effort, that one suspects its neglect can

only be due to professional embarrassment and consequent repression

of the disturbing facts. This was a study of all persons receiving

psychiatric treatment in New Haven, Connecticut, during a specific

period, to discover what determined the kind of treatment they

received. One would normally make the assumption that diagnosis

would determine treatment, that what was done for a patient would

be based upon what was the matter with him. These investigators

found no relationship between diagnosis and treatment. They studied

other variables such as age and sex, and found these unrelated to

treatment. The one variable that did emerge was the relationship

between the socioeconomic status of the patient and the type of

treatment received. If he were from the lowest socioeconomic group,

he received some kind of mechanical, inexpensive and quick therapy

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[11]A.B. Hollingshead and F.C. Redlich, <u>Social Class and Men-
tal Illness</u> (New York: Wiley, 1958).

such as electric shock. If he were from a high socioeconomic group, he received extended, expensive, talking-type psychotherapy. If the patient were not only affluent but also a member of an old prestigious family, so situated in life that he bestowed honor on his helper, he received extended talking-type psychotherapy, but at a discount. The relationship between socioeconomic status and type of treatment received was not manifested in private practice alone but was also evident in the treatment provided by clinics and other public supported agencies. Thus, all mental health professions are involved.

The other pivotal book is <u>Mental Health Manpower Trends</u>,[12] by George Albee, prepared for the Joint Commission. Albee's main thesis can be stated simply: The prospective supply of people for training in the mental health professions is limited, demands for services will continue to grow more rapidly than the population of the country, and there will not be in the foreseeable future enough mental health personnel to meet demands for service.[13]

Albee has made it very clear that it is erroneous to assume that we need only wait a few years and there will not be any personnel shortages. We will not catch up to the need, nor solve the problem in this manner. Albee's work is a most important and

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[12]George M. Albee, <u>Mental Health Manpower Trends</u> (New York: Basic Books, 1959).

[13]Joint Commission . . ., op. cit., pp. 140ff.

instructive book for the shaping of a national mental health program
as well as for the development of curricula for the training of mental
health specialists. Albee's thesis, as was proclaimed and reflected
by the Joint Commission's report, requires a fundamental shift in
strategy in providing mental health services to the people of this
nation.

This new direction in mental health is pertinent to pastoral
care in that it raises questions about our present model of coun-
seling as well as suggest some implications for our discipline. If
we take Hollingshead and Redlich's study seriously, our present
clinical model of one-to-one counseling needs to be re-evaluated.
Further, are we offering services only to one socioeconomic group
in our society to the neglect of others? According to Albee's findings
we as pastors have much to contribute to mental health nationally
in terms of manpower when we consider the number of churches and
temples across our land and professional personnel who service them.
Mental health is the clergymen's business as Howard Clinebell points
out:

> Mental and spiritual health are inseparable. The health of
> one's relationships with self and others (mental health), and
> with God, the universe, and ultimate values (spiritual health),
> are deeply interdependent. No understanding of mental health
> is complete if it ignores spiritual health. (By spiritual health,
> I mean the adequacy and maturity of one's relationships with the
> vertical dimension of existence.) No conception of spiritual
> health is complete if it ignores mental health. Positive mental
> health is synonymous with the biblical term "wholeness." Both

point to the fulfillment of human potentialities for living a
constructive life in mutually satisfying, loving relationships.[14]

Mental health is a major concern of the church and as such we need

to take seriously the Joint Commission's report that a fundamental

shift in strategy is necessary in providing mental health care.

There may be nothing wrong with the private practice of the one-

to-one relationship, the fifty minute hour, but in terms of pro-

viding a sound base for the development of a national mental health

program, this direction is a dead end, except perhaps for the two

participants. This mode of offering service consumes far too much

manpower for the benefit of a far too limited segment of society.

It is apparent that in terms of mental health there have been

many rapid and great strides in the last century. Considerable effort

went into legitimizing the mental health field and establishing it

within society. We have grown up in the image of a particular

model, namely, the medical or biological model, which has proved

effective in some areas, but broken down in the larger social sense.

As Cowen and Zax have observed, we have spent so much time becoming

respectable that until recently "we had neither the time nor the se-

curity to look unto ourselves or to support truly critical evaluation

of the substance of our efforts."[15] Now that a comprehensive

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[14]Howard Clinebell, Jr. (ed.), Community Mental Health (New
York: Abingdon Press, 1970), p. 15.

[15]Emery L. Cowen, Elmer A. Gardner, and Melvin Zax (eds.),
Emergent Approaches to Mental Health Problems (New York: Appleton-
Century-Crofts, 1967), p. 12.

evaluation of mental health has been made in our country, and while

there may be substantial disagreement at some points, the following

problems are the prime issues facing the mental health fields (in-

cluding pastoral counseling) today:

> (1) The need for mental health helping services far outstrips
> available resources; (2) Past practice has resulted in little
> progress in the treatment of entire classes of disorder; (3) It
> appears that both the effectiveness and impact of one of the
> backbone techniques in our helping armamentarium—psychotherapy—
> has been seriously overestimated; (4) Delivery of mental health
> helping services has been characterized by profound inequities,
> with particular reference to variables such as race, social
> class, education, and geography; and (5) Our modes for delivery
> of mental health services are, in the main, out of tune with the
> social reality and life-styles of vast numbers of potential
> recipients.[16]

It is from these issues and the above-mentioned developments in men-

tal health that has brought us to the community mental health move-

ment as the direction to proceed. It is clear that we as churchmen

and pastors need to be aware of this sign post and struggle to find

alternative stratagems and pathways to meet the unmet needs of men-

tal health in our churches, temples, communities and country today.

PASTORAL COUNSELING REDEFINED

It is my thesis, which is also supported by the third mental

health revolution, that pastoral counseling as a discipline needs

to be broadened by a redefinition that has a more encompassing

foundation which will incorporate a broader, unifying view of man.

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[16]Ibid.

By and large the current model of pastoral counseling is based on a one-to-one, pastor-counselee, doctor-patient type of relationship or at best a small group counseling model. This is fine, except that it is inadequate to meet the current mental health demands. To further describe the current model of pastoral counseling is more complex as our discipline is rich in many theological and psychological points of view. Pastoral counseling includes many levels of counseling from supportive, short term counseling, to marriage counseling, to, in some instances, depth psychotherapy by trained pastors. Training of pastoral counselors also varies from some training to that of the specialist. While most of pastoral counseling is distinguished from psychotherapy, it is in this direction our discipline has moved. As counselors little attention has been given to the natural environment from which the individual comes, with the family being a possible exception. From a community mental health perspective, pastoral care should not only be concerned with counseling, but also with social change.

In short, pastoral counseling has evolved with the concern of practical theology, drawing heavily upon the resources of psychology for its useful tools. This is both legitimate and helpful. However, with the findings and developments in the social and behavioral sciences, borrowing only from psychology is no longer adequate. Pastoral counseling needs to broaden its base and integrate the resources not only of psychology, but sociology, anthropology and other social sciences as well--recognizing that as a discipline

it is rooted in theology.

The following is a redefinition of pastoral counseling keepinf in mind the thrusts of both counseling and social change. _Pastoral counseling is a relationship of a minister or church with an individual, a family, small group, and/or social system in which people's spiritual and mental well-being and life-world is sustained, supported and/or enhanced._ By mental well-being I mean life lived in freedom, commitment to an object of devotion, integrity, and in continuity and unity with the social environment as well as growth in fulfilling one's potentialities. This is done by helping people help themselves through the dual processes of 1)gaining understanding of their inner conflicts which prevent them from relating in need-satisfying and 2) working to remove blocks in their social environment that stymie growth. Both of these processes are interrelated and interdependent. The pattern of thought today in contemporary biological, psychological, sociological and historical analyses converges in the view of life that it is interactional. H. Richard Niebuhr's image of "man-the-answerer, man engaged in dialogue, man acting in response to action upon him. . . . The understanding of ourselves as responsive beings, who in all our actions answer to action upon us in accordance with our interpretation of such action"[17]

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[17]H. Richard Niebuhr, The Responsible Self (New York: Harper & Row, 1963), pp. 56f.

provides the framework for interactional conceptualizing. This means in terms of spiritual and mental well-being that there is an inter-relationship between being freed from inner conflicts to be respon-sive and responsible in relationships in order to be a "growth agent" in other's lives which is necessary for continued growth in one's own life.[18]

A COMMUNITY MENTAL HEALTH MODEL

Spiritual and mental well-being of people is interrelated and interactional with their natural environment. The pastor as counsel-or can no longer only concern himself with the individual but must also concern himself with the individual's social milieu. Pastoral counseling is quite sophisticated when concerning counseling the in-dividual or working in small groups. However, as a change agent of social systems, most pastors operate by the "seat of their pants."

A model is needed to give a theoretical framework from which to draw operational models for the pastor as change agent of both individuals and social systems. It should be noted that models are never an end in themselves, but a means to clarify and understand complicated operations.[19] While models should be "functional",

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[18]Clinebell, op. cit., p. 53.

[19]Allen J. Moore, "The Place of Scientific Models and Theo-logical Reflection in the Practice of Ministry," Pastoral Psy-chology, XXII:210 (January, 1971), 32.

Allen Moore alerts us to the fact that models "serve primarily to
provide the forms for ministry rather than defining the functions
(underlining mine) themselves . . . (as) the functions of ministry
are historically defined."[20] It is hoped that the model that follows
will not be interpreted to be normative, but a viable, relevant
model for pastoral counselors.

The basis for the model is the community mental health move-
ment. As the word movement implies, community mental health is a
term pointing in a certain direction for mental health, rather than
being descriptive of a set theoretical framework from which to draw.
It is by no means a unitary concept and its referents are at least
as varied as the propositions and orientations that contribute to
its present significance. This movement, then, is in process of
evolving and the following model will bring together many of the
issues of community mental health. Its emphasis, as mentioned, is
placed upon the interrelationships between the individual and the
community in which he lives.

1. A Process Model.

The history of mental health has been more accurately a history
of mental ill-health. First, it was regarded as insanity and now,
for nearly two centuries, has been regarded as a biological malady

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[20]Ibid., p. 33.

which requires medical treatment. What evolved was a "disease" model or sometimes referred to as a medical model concept of mental health in which attitudes, hypotheses, and expectations are derived from the premise that emotional and psychological disorder may be regarded, structurally, much in the same way as physical illness.

While models are neither true nor false, but more or less useful, there are differences in the level of literalness with which it is espoused. In a more narrow sense, the illness model views emotional disorder as a disease involving specific biological, chemical, or physiological pathogenic agents, much like viruses, germs, etc., which cause physical illness. Cure, then, exhibits medical procedures for intervention involving electroshock, chemical, surgical and other types of physically-based therapies. For others, still within the framework of the medical model, a given pathological condition, such as schizophrenia, may be viewed as a type of "illness" without knowing the origins of the disease, other than a malfunction, psychological in nature, and, therefore, treated by psychological procedures, such as psychotherapy. In either case, there is a focus on pathology and the assumption that the pathogenic agent must be identified, diagnosed, and corrective intervention, be it physical or psychological, must be directed toward the elimination or reduction of the pathogenic agent. The distinction is often made between symptom and disease, that the symptom should not be confused with the disease. In this light, behavior is considered to be a symptom and is only important for what is shows and not for what it is.

Since diagnosis and treatment are so important, the frame of reference of the illness model of mental health has been a general maintenance of the classical, one-to-one, physician-patient relationship, in which the doctor is the authoritative agent and the patient assumes the sick role.

The illness model has had its influence on pastoral counseling. As mentioned earlier, the pioneers in pastoral counseling modified the findings of the pioneers in the mental health field, and consequently were influenced by the medical model which was predominant. The one-to-one relationship of pastor-counselee, the need to become trained and qualified to recognize symptomatic behavior and refer to more qualified people for treatment, the seeking out of unconscious motivating factors as well as childhood causes of adult behavior, all have been goals of pastoral counseling and illustrate the cause and effect orientation of the illness model, as well as the authority position of the pastor in the one-to-one relationship.

Since it is our contention that pastoral counseling has been greatly influenced by the illness model, what are the limitations of this model? Traditionally, the mental illness therapist begins by altering the internal conditions of the patient (e.g., reduces his anxiety) and relieves the overt symptoms. However, there is first, little data on the internal conditions accompanying overt behavior. Second, there is little relationship between the treatment method and the actual internal conditions. The etiology and nature of psychological disorder is fundamentally different from

what is involved in physical disorder. Emotional problems do not characteristically result from tissue damage or viruses. Rather, they are likely to reflect complex psychological determinants and multiple sources of influence deriving from interaction with key social institutions and important "others" in the individual's life experience. Recognizing this, the medical model is limited in that there are no antibodies, medicines, prophylactics, or operations to protect the individual from the daily irritants and pathological processes of an unhealthy environment. From a community mental health point of view, an equally or perhaps more effective point of intervention with the individual displaying emotional and behavioral problems is with the disturbing environment rather than the disturbing set of internal conditions.

Further, since psychological problems may be deep-seated and evolve over a long period of time, treatment is always "counterpunching," which raises the question of effectiveness and efficiency of the long-range strategy for mental health as practiced by the illness model. For example, an emotionally disturbed twenty-five-year-old adult has spent some 200,000 hours living potentially under the influence of a disturbing environment. His life-style is well developed. A given treatment of 10, 20, or even 100 hours at this point in the individual's life may at best be a weak counterpunch. Even assuming that treatment was effective, the individual is plunged back into the same environment that helped contribute to his initial problems.

There are other serious limitations of the medical model. The one-to-one clinical orientation is very costly on two levels. At one level, if we take Albee's findings seriously, this approach is costly in professional manpower as there are currently not enough mental health professionals to meet the present need and the disparity is likely to increase, not decrease. Even adding all the pastors and rabbis to the manpower of counseling, they are by no means full time counselors as they have other responsibilities besides counseling. At most a pastor may be able to counsel with ten individuals, and more realistically, five, in a week's time. Consequently, the one-to-one, pastor-counselee model is costly in manpower at a time when the need is so great. It is also costly in cost itself, as an hour of clinical time of a helping professional is expensive for most people, and out of reach for a third of the American people who are in a low financial status. The pastors who offer "free" counseling are not enough to meet the demand. Further, the effectiveness of counseling based on this model, both in terms of the counselor and counselee, is questionable if no fee is charged.

Another limitation is that the medical model is basically a passive model in reaching those who are in need of its help. The sick come to the doctor, the counselees come to the pastor. For this reason it necessarily fails to have impact for tremendous numbers of individuals with psychological and spiritual problems because, for many reasons, their problems are not well enough defined to prompt them to seek assistance within the medical model framework.

In terms of a comprehensive model of mental health, the medical model is again limited. As several have pointed out, the _modus operandi_ is meaningless and so alien to a large number of our population, particularly those with limited education,[21] and those who are among the lower socioeconomic status.[22] It is as if there were two different worlds with no overlap of frame of references in which to offer any service. It is not surprising, then, that mental health services have, until recently, been defined, functionally, as out-of-bounds for the poor.

At this point, the single most important criticism of the medical model is the fact that it is an _illness model_ from which attitudes, hypotheses, and expectations are derived concerning mental health as we have seen. In contrast, the community mental health model is a health model, from which a whole host of different attitudes, hypotheses, and expectations will be laid forth.

What, then, is mental health? With the influence of the illness model, voluminous amounts of literature have been written concerning what mental health is _not_ or what is abnormal behavior or neurotic strivings. There are comparatively few statements expressing what

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[21]See Frank Riessman, "A Neighborhood-based Mental Health Approach," in Cowen, op. cit., pp. 162-184.

[22]See Elmer Gardner, "Psychological Care for the Poor: The Need For New Service Patterns with A Proposal For Meeting This Need," in Ibid., pp. 185-213.

mental health is. Any adequate definition is complex. This writer

understands mental health in the following ways:

A. <u>Mental health aims at a goal</u>. However, mental health is

more of a process, than an end result that one obtains. A mentally

healthy person is continually in the process of becoming.[23] However,

in the course of one's unfolding life, there are biological, psycho-

logical, sociological, and spiritual goals that one hopefully a-

chieves, only to arrive at and discover a new direction to go. Mental

health aims at a goal, but is more like a road with inns along the

way. The road is a continuum with the difference between mental

health and ill-health being one of degree. A person can travel up

or down the two-way road or shut oneself in an inn, and stop growing.

B. <u>Mental health as a personality characteristic</u>. Marie

Jahoda has made an extensive study of positive mental health con-

cepts.[24] She describes two ways of viewing mental health in person-

ality terms. It may be seen as a relatively constant and enduring

function of personality yielding classifications of the health of a

person; or it may be seen as a less permanent function of personality

and the situation yielding a classification of the adequacy of actions

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[23]Gordon Allport, <u>Becoming</u> (New Haven: Yale University
Press, 1955).

[24]Marie Jahoda, <u>Current Concepts of Positive Mental Health</u>
(New York: Basic Books, 1958).

or behavior. Jahoda uncovered six major categories from diverse

approaches to mental health. Paraphrased,

> a person is mentally healthy to the degree that: (a) His at-
> titudes toward himself are characterized by self-acceptance,
> self-esteem, and accuracy of self-perception. (b) He actualizes
> his potentialities through personal growth. (c) His inner drives
> are focused and personality integrated (the opposite of being
> fragmented by inner conflicts). (d) He has a dependable sense
> of inner identity and values so that he is not overly dependent
> on the influence of others. (e) He is able to see reality--
> the world and other people--with accuracy because his subjec-
> tive needs do not distort his perceptions. (f) He is able to
> take what life gives him; master his environment; and enjoy
> love, work, and play.[26]

These, then, are some positive concepts or goals of mental health.

C. Mental health as a characteristic of environment. Sit-

uations or societies have been referred to as healthy or sick. L.K.

Frank's Society as the Patient[26] and Erich Fromm's The Sane Society[27]

are examples of this. Within the past decade a group of people re-

presenting various disciplines in the social sciences as well as

from psychology and psychiatry, met in a series of meetings held in

Washington, D.C., concerned with the chaotic and perplexing interplay

of the environmental forces which affect individual well-being. As

[25]Howard J. Clinebell, Jr., Mental Health Through Christian Community (New York: Abingdon Press, 1965), pp. 16f, citing Jahoda, op. cit., pp. 23ff.

[26]L.K. Frank, Society as the Patient (New York: Harper and Bros., 1958).

[27]Erich Fromm, The Sane Society (New York: Holt, Rinehart, and Winston, 1955).

reported in _The Urban Condition_,[28] they discovered they could not

agree about mental health as long as they tried to talk about it

only in terms of the individual divorced from his environment. At-

tempting to answer the question, "What would be the best realization

of our potential, the greatest opportunity for happiness and

achievment and making life worthwhile?" they discovered that they

also had to describe mental health in terms of overcoming social

evils and the ability to develop cooperative societies.[29] What

emerged from their many considerations was the recognition that

> the mental health of the individual and its concomitants in the
> environment cannot be separated--despite current usage, which
> restricts the term health to persons and uses terms like
> disorganization or disintegration when it is the community or
> social structure that is under study.[30]

In our discussion of mental health the environment is as important as

individual psychological factors.

Some may argue that mental health is not a characteristic of

environment, but rather only involves social aspects, and therefore,

to speak of mental health as a characteristic of environment is mean-

ingless. This is to view an individual apart from his environment,

and, as such, completely autonomous. The person, however, cannot

be understood apart from his environment. Person-in-environment

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[28]Leonard J. Duhl, _The Urban Condition_ (New York: Basic
Books, 1963).

[29]Ibid., p. 6.

[30]Ibid., p.7.

is a unitary concept. The person is a part of and controlled by his environment, but it is an environment <u>almost wholly of his own making</u>. The physical environment of most persons is largely man-made--the walls that shelter him, the tools he uses, the surfaces he walks on--and the social environment is obviously man-made. It generates the language a person speaks, the customs he follows, and the behavior he exhibits with respect to the ethical, religious, governmental, economic, educational and psychotherapeutic institutions that influence and control him.

Mental health of the individual is a result of a combination of physical, emotional, social, economic, spiritual, and environmental factors that are interwoven and interact to reduce or increase the possibility of sound mental health. This means that structures in society, social systems, institutions (including the church), agencies, family, friends, job and economic status, community, all forces with which an individual interacts, all affect his mental health.

D. <u>Mental health as a characteristic of religion</u>. Man by his very nature is religious. The root form, <u>religio</u>, means "to tie or bind." A man's religion is that body of beliefs and practices that "binds him together"--the glue of his wholeness. "Man," according to H. Richard Niebuhr, "must believe in something for the sake of which he lives; without belief in something that makes life

worth living man cannot exist."[31] There are many systems of belief,
attitudes and values acting continually upon man through his family,
political, economic and cultural systems to which he also is contin-
ually responding. This raises the question that Niebuhr asked:

> . . . what ties all these responsivities and responsibilities
> together and where is the responsible self among all these roles
> played by the individual being? Can it be located within the
> self, as though by some mighty act of self-making it brought it-
> self into being as one "I" among these many systems of interpret-
> ation and response? The self as one self among all the sys-
> tematized reactions in which it engages seems to be the counter-
> part of a unity that lies beyond, yet expresses itself in all
> the manifold systems of actions upon it. In religious lan-
> guage, the soul and God belong together; or otherwise stated,
> I am one within myself as I encounter the One in all that
> acts upon me.[32]

Man, then, needs some center of value, something on which to rely for
meaning. He cannot live without a cause, without some object of de-
votion. Man, then, is a religious creature and as such mental health
must also be viewed in light of this. Man's mental health is directly
related to the glue of his "wholeness"—i.e., his religion.

That man needs an object of devotion raises a problem for
spiritual mental health in that as Niebuhr has observed, "usually,
however, man has several objects of devotion as it is evident that
men have many gods and that our natural religion is polytheistic."[33]

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[31]H. Richard Niebuhr, *The Meaning of Revelation* (New York:
Macmillan, 1962), p. 77.

[32]Niebuhr, *The Responsible Self*, p. 122.

[33]H. Richard Niebuhr, *Radical Monotheism and Western Culture*
(New York: Harper & Brothers, 1960), p. 119.

While this further demonstrates the inescapable part of human exis-
tence of needing to have definite reference to specific beings or
values, the problem is that for sound mental and spiritual health
there must be a "wholeness"--a unity in selfhood. If man relies on
several objects of devotion, none of these "gods" then, could give
continuous meaning and unity in selfhood, since they are not absolute
and must compete with one another. "Without a single faith there is
no real unity of the self."[34] Niebuhr answered this problem
with his concept of "radical monotheism" in which unity of self-
hood, integration of one's history and faith, are only all achieved
if a single loyalty supersedes all others, that there can only be
one object of devotion, God. "For radical monotheism the value-
center is . . . to no one reality among the many but to One beyond
all the many, whence all the many derive their being, and by par-
ticipation in which they exist."[35] Sound mental health, then,
aimed at wholeness, is dependent upon man unifying his life around
a single object of devotion that is absolute, the "One beyond all the
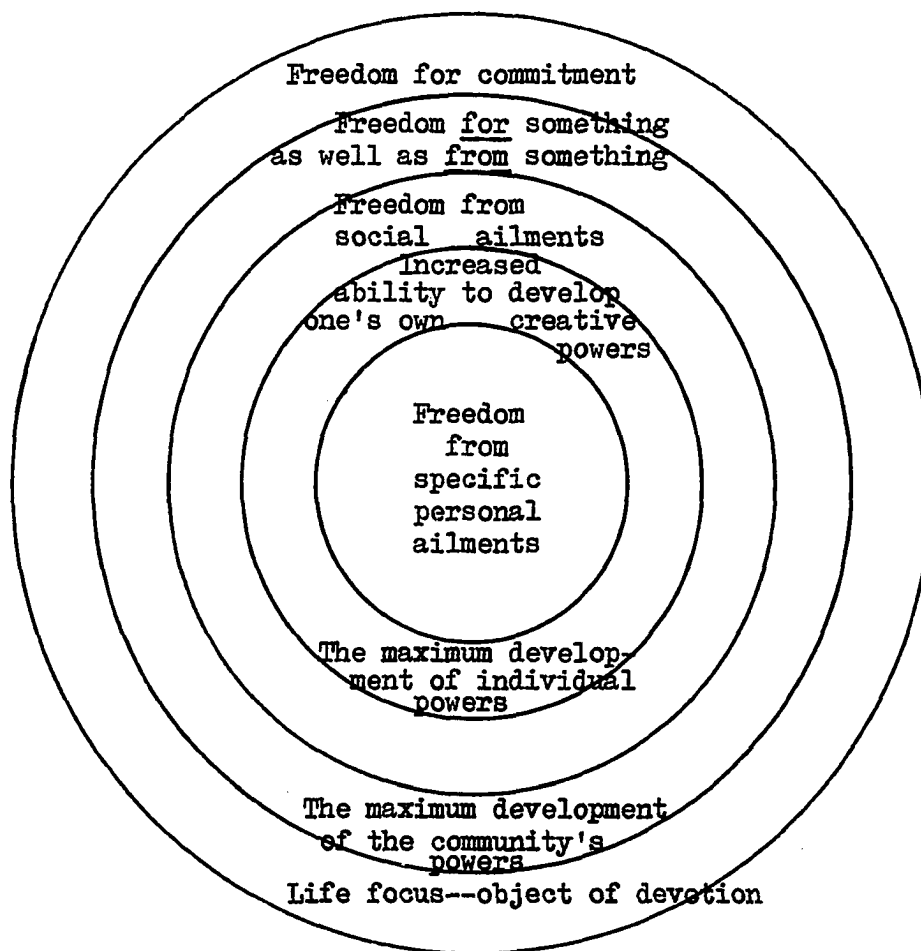many,"--God.

We understand by mental health, then, that it is the process
of life lived in freedom, commitment to an object of devotion, in-
tegrity, and in continuity and unity with one's environment as well

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[34]Niebuhr, The Meaning of Revelation, p. 78.

[35]Niebuhr, Radical Monotheism, p. 32.

as growth in fulfilling one's potentialities. Mental health is personal and social, it is individual and communal. It consists of psychogenic, sociogenic and religious factors which cannot be separated.

By way of summarizing our discussion of mental health, Robert Bonthius suggests four notions that can be diagrammed as four concentric circles,[36] to which I add a fifth.

Freedom for commitment
Freedom for something
as well as from something
Freedom from
social ailments
Increased
ability to develop
one's own creative
powers

Freedom
from
specific
personal
ailments

The maximum development of individual powers

The maximum development of the community's powers
Life focus--object of devotion

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[36]Robert Bonthius, "Pastoral Care for Structures as well as Persons," Pastoral Psychology, XXVIII (May, 1967), p. 12.

The innermost circle, which has the most limited meaning of mental health, is "freedom from specific personal ailments." This is the point at which Freud began and is the sphere of psychoanalysis-- to free oneself from neurotic behavior.

The next circle, moving outward, is "increased ability to develop one's own creative powers." This is a self-fulfillment notion of mental health and has a valid place as one of the four elements of mental health. This idea moves beyond the idea of suc- cessfully controlling one's inner conflicts, to the idea of sublima- tion, i.e., channeling hostility into socially significant endeavors, and development of individual powers to their fullest.

The third circle, which is analogous to the first in that it is the environmental dimension of the first, is "freedom from social ailments." As with specific personal ailments, there are specific environmental ills which express interpersonal or community disturbances. Fromm, in the Escape from Freedom,[37] observes that the entire culture whithin which an individual lives creates conflicts for the individual, blocking his growth, causing him sickness. Poor social conditions, sick social ailments from which one must escape for sound mental health.

Like the third circle, the fourth circle is analogous to the second circle. Both think of mental health not merely as

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[37]Erich Fromm, Escape from Freedom (New York: Holt, Rinehart, and Winston, 1941).

freedom _from_ something, but as freedom _for_ something and as power to move toward whatever it is that is valued. This sphere of mental health is concerned with the maximum development of the community's powers. As Bonthius points out, "This is more than the sum of the development of individual powers, because the development of individuals depends to a significant degree on a favorable environment."[38]

The outside circle is the necessity of having a focus in life, an object of devotion, which gives unity and continuity in life--i.e., "wholeness." This circle is freedom for commitment; and when one makes a commitment, i.e., when one knows to whom or what he is committed, he is free.

This view of mental health is admittedly complex and inter-disciplinary. The earlier model of pastoral counseling drew the line with the two innermost circles, which are psychological. The present model of pastoral counseling, as suggested in Clinebell in Basic Types,[39] while suggesting new directions for the pastoral counselor and providing many "handles," still was oriented to the two innermost circles. The community mental health model, which I am suggesting for pastoral counseling, broadens this base to include

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[38]Bonthius, op. cit., p. 13.

[39]Howard J. Clinebell, Basic Types of Pastoral Counseling (Nashville: Abingdon Press, 1966).

the third circle, sociological, the fourth circle, sociological and anthropological, and the fifth circle, which is theological.

2. Systems Theory as Framework for Model.

The complexity of the interacting phenomena of mental health is illustrated in the Midtown Manhattan Study of mental health, in which Leo Srole, et al., started with a convergent view of causality that viewed sociogenic factors as leading to mental health or illness.[40] But the authors then recognized the importance of: 1) the possible reciprocal influences of the dependent variable back onto the independent variables, by way, for example, of the "choices" of individuals of their particular social environments, and 2) the possible "circular" or "spiraling" interactions of these related factors through time. Thus, there were now seen to be at least three categories of factors or variables to be taken into account: 1) the "dependent variable" mental health or illness, 2) the "independent" factors—age, sex, ethnic origin, and so forth, 3) "reciprocal" variables"—marital status, socioeconomic status, religion, rural-urban migration. Concerning the four aspects of the reciprocal variables, the authors suggest that the "variations on all four may be self-determined, and as such may well be consequences rather than

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[40]Leo Srole, and others, _Mental Health in the Metropolis_ (New York: McGraw-Hill, 1962), pp. 12f.

rather than independent antecedents of mental health."[41]

It is clear that anyone who concerns himself with the complexity of mental health must necessarily have a conceptual framework to sort out the processes and mechanisms involved. Indeed, no observations or diagnoses are ever made on "raw facts," because facts are really observations made within a set of concepts. There are several number of approaches that might be used as our framework,[42] but only one promises to get at the full complexity of the interacting phenomena of human events, namely, modern systems theory.

It is not within the scope of this dissertation or our intent to suggest all possible conceptual frameworks and give a critique of their possible shortcomings. What is important here is to suggest briefly why we selected modern systems theory. The premises of this theory are clearly stated by one writer:

> Diagnosing the client as a system of variables (provides) a way
> of managing the complexity of "everything depends upon everything
> else" in an orderly way. Use of system analysis has these
> possibilities: (a) diagnosticians (pastoral counselors) can
> avoid the error of simple cause-and-effect thinking; (b) they
> can justify what is included in observation and interpretation
> and what is temporarily excluded; (c) they can predict what
> will happen if no new or outside force is applied; (d) they
> are guided in categorizing what is relatively enduring and

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[41]Ibid., p. 18.

[42]See for examples, Walter Buckley, _Sociology and Modern Systems Theory_ (Englewood Cliffs: Prentice-Hall, 1967), Chapter 2 and Daniel Katz and Robert L. Kahn, _The Social Psychology of Organizations_ (New York: Wiley, 1966), Chapter 1.

stable, or changing, in the situation; (e) they can dis-
tinguish between what is basic and what is merely symptomatic;
(f) they can predict what will happen if they leave the events
undisturbed and if they intervene; (g) they are guided in select-
ing points of intervention.[43]

Further, systems theory permits an integration of sociology and psy-

chology--sociology with its macro-frame of reference, broader in

scope, and psychology with its micro approach. Also systems theory,

with its entropy assumption, emphasizes the close relationship be-

tween a person or a structure and its supporting environment in that

without continued inputs the person or structure would soon run

down. This supports the community mental health view of the nec-

essary dependence of any person or organization upon its environment.

Systems are not anything new. We have always had systems,

as they are necessary for survival, but we have not been very con-

scious of them. Modern systems theory began blossoming during

World War II and today such terms as "input," "output," "feedback,"

and "system" are becoming common vocabulary.

Definitively, a system is a "set of objects together with

the relationships between the objects and between their attributes"

in which objects are the parts of the system, attributes are the

properties of the objects, and relationships "tie the system

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[43]Robert Chin, "The Utility of Systems Models and Develop-
mental Models for Practitioners," in Warren G. Bennis, Kenneth D.
Benne, and Robert Chin (eds.), The Planning of Change (New York:
Holt, Rinehart and Winston, 1961), pp. 206f.

together."[44] These relationships are dynamic, as some process, both within the system and between systems, is continually going on. Abstractly one could say that "everything is related to everything else." This kind of statement, however, leads to an "all-encompassing relativity" useful, namely, to theoreticians. A more useful and narrower concept is that of "'natural systems,' units whose parts depend on each other for the continuance of significant aspects of their present state of being."[45]

> The components (units) may be relatively simple and stable, or complex and changing; they may vary in only one or two properties or take on many different states. The interrelations between them may be mutual or unidirectional, linear, non-linear or intermittent, and varying in degrees of causal efficacy or priority. The particular kinds of more or less stable interrelationships of components that become established at any time, thus achieving a kind of "whole" with some degree of continuity and boundary.[46]

A natural system can be a human body, a personality or an organization, or something as large as a solar system. It is the interdependence and relationship between parts of a natural system that we want to understand and perhaps influence. In terms of human behavior we can see that in the sense where everything is related to everything else that a change in any one thing creates the possibility

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[44]A.D. Hall and R.E. Fagen, "Definition of System," General Systems Yearbook, I (1956), 18-28.

[45]John Seiler, Systems Analysis in Organizational Behavior (Homewood, Ill.: Irwin and Dorsey Press, 1967), p. 4.

[46]Buckley, op.cit., p. 41.

of a change in everything else.

For analytical reasons in order to specify what is inside or outside any system, we need to define its "boundary" line. The boundary could be the skin of a person, the number of people in a small group, or the United Methodist Church in America.

> The operational definition of boundary is: the line forming a closed circle around selected variables, where there is less interchange of energy (or communication, etc.) across the line of the circle than within the delimiting circle.[47]

It should be noted that systems do not happen, but evolve to (1) maintain a relationship, or (2) to get something done. That is why systems are necessary for survival as they give us our stability in life (recognizing at the same time that what is stability for one may not be for another).

There are several types of systems. There are (1) Closed systems, e.g., a tightly corked vacuum bottle; (2) Open systems, where one can move in and out, such as the Church; (3) Formal systems, which have a system analysis such as General Motors; and (4) Informal systems with no meetings or officers, such as neighborhoods or social cliques in a church. In our terminology we must distinguish the above and another more technical meaning for open and closed systems. In its technical sense, a closed system is one that does

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[47]Chin, op. cit., pl 203.

not engage in interchanges with the environment, i.e., its boundary is leak-tight. In an open system, on the other hand, there is an exchange of materials, energies or information, but more importantly "this interchange is an essential factor underlying the system's viability, its reproductive ability or continuity, and its ability to change."[48] All living systems are open systems having input and output across system boundaries. Nevertheless, it is essential at times to analyze a system as if it were closed, and then to open the system to new impact from the environment, and close it again to observe and speculate what would happen.

Having defined systems and mentioned the types of systems, we will briefly attempt to summarize and state some of the presuppositions and aspects of systems today.

A. Equifinality. We must avoid our tendency and "habit" to oversimplify the cause of some particular effect. There are no single causes. Traditional causal analysis fails to deal adequately with phenomena such as emergence, purpose or goal seeking, self-regulation, and adaption. Thinking in terms of systems, however, in itself "denotes the notion of multiple causation and complex interaction of forces."[49] Modern systems research has suggested the concepts "equifinality," meaning that different

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[48] Buckley, op. cit., p. 50.

[49] Seiler, op. cit., pp. 3f.

initial conditions lead to similar end effects; and "multifinality,"
meaning just the opposite in that similar initial conditions lead to
different end effects. If a system is open, as are all living sys-
tems, it can be shown that the final state will not depend on the
initial conditions. The system, itself, has properties independent
of conditions imposed on the system, and, metaphorically speaking,
has a "goal of its own," or exhibits "equifinality."

B. Tension. In all systems there is some level of tension
which is characteristic of and vital to systems.[50] The reason for ..
this is that the objects and components within a system are differ-
ent from each other and as such are not perfectly integrated, or
are changing and reacting to change or because of pressure from
outside inputs. Tension may manifest itself as either destructive
or constructive or in cycles of both. When there is a felt blockage
in a system, "stress" and "strain" is the resultant tension. When
stresses and strains accumulate there is conflict. In a sociocul-
tural system, tension is always present in some form--

> sometimes as diffuse, socially unstructured strivings, frus-
> trations, enthusiasms, aggressions, neurotic or normative
> deviation; sometimes as clustered and minimally structured
> crowd or quasi-group processes, normatively constructive as
> well as destructive; and sometimes as socioculturally struc-
> tured creativity and production, conflict and competition,
> or upheaval and destruction.[51]

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[50]Buckley, op. cit., p. 51.

[51]Ibid.

For pastors as change agents interested in bringing about change, the identification as well as analysis of how tensions operate in a system are perhaps the most important aspects of system analysis. Analysis of the stress and strain and the conflict will lead to two general kinds of actions: 1) dynamic, those which do not affect the structure of the system, and, 2) system alteration, those which directly change the structure itself.

C. Equilibrium or dynamic homeostasis. A property of systems is equilibrium, i.e., "the relations between their parts tend toward a steady state--toward a balance of forces which is stable and enduring."[52] Equilibrium in terms of some systems is the maintenance of the status quo, or "stationary equilibrium." This would hold true more for some organizational systems. In reality a steady state is not motionless or a true equilibrium as there is a continuous inflow of energy from the external environment and a continuous outflow of products from the system; however, the ratio of the energy exchanges and the relations between parts remains the same. More accurately this is called a "quasi-stationary" state of equilibrium.[53] More often the type of equilibrium we are likely to find is a "dynamic equilibrium," such as the ongoing development of the

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[52]Seiler, op. cit., p. 9.

[53]Kurt Lewin, "Quasi-Stationary Social Equilibria and the Problem of Permanent Change," in Bennis, op. cit., p. 235.

human body, for example. In terms of organizations and institutions, they "go through continual phases of stability and balance, then awkward adolescent changes, then new levels of stable equilibrium."[54] Large systems exhibit a high degree of stability which accounts for the difficulty of changing large institutions.

A change agent needs to be aware of a system in equilibrium and know how it responds to outside impingements. A system will most likely react by:

> (1) resisting the influence of the disturbance, refusing to acknowledge its existence, or by building a protective wall against the intrusion, and by other defensive maneuvers. . . .
> (2) By resisting the disturbance through bringing into operation the homeostatic forces that restore or re-create a balance. . . .
> (3) By accomodating the disturbances through achieving a new equilibrium.[55]

D. Feedback. The mechanism underlying dynamic equilibrium is feedback.[56] Simply conceived feedback can be thought of in terms of an input-output mechanism in a system, in which "elements are introduced, transferred, and emitted" across the boundary.[57] The process of feedback becomes more complicated when we consider that the output of a system influences, subsequently, the input into the same

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[54]Seiler, op. cit., p. 9.

[55]Chin, op. cit., p. 205.

[56]Seiler, op. cit., p. 11.

[57]Ibid.

system. In terms of a circular chain of causation we can understand this phenomenon. But a ciruclar chain of causation is not a true feedback loop, but rather a "pseudo-feedback" loop lacking in internal variables. Systems with internal variables are f.eedback-controlled systems. "Feedback-controlled systems are . . . goal-directed."[58] Being goal-directed there are internal mechanisms which measure and compare the feedback input against a goal. This is a true feedback loop. An aspect of being goal-directed is that behavior is purposeful, and "purposeful behavior involves true feedback loops, not just simple circular causal chains."[59]

Further, feedback is distinguished as either negative or positive. Negative feedback is characteristic of a homeostatic state and thus is instrumental in achieving and maintaining the status quo or stability of relationships. This would be characteristic of a more closed system. Positive feedback, on the other hand, being more characteristic of open systems, leads to change, which in terms of a system is the loss of equilibrium or stability.

> In both cases, part of a system's output is reintroduced into the system as information about the output. The difference is that in the case of negative feedback this information is used to decrease the output deviation from a set norm or bias—hence the adjective "negative"—while in the case of positive feedback the same information acts as a measure for amplification

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[58]Buckley, op. cit., p. 53.

[59]Ibid., p. 70.

of the output deviation, and is thus positive in relation to the already existing trend toward a standstill or disruption.[60]

Karl Deutsch further enriches the concept of feedback, in particular reference to society and sociocultural systems by

> suggesting the kinds of information required to "steer" a society, the kinds or levels of feedback underlying system effectiveness, and the successive levels of purpose thereby made possible. For effective "self-direction" a sociocultural system must continue to receive a full flow of three kinds of information: 1) information of the world outside; 2) information from the past, with a wide range of recall and recombination; and 3) information about itself and its own parts. Three kinds of feedback, which make use of these types of information, include: 1) goal-seeking--feedback of new external data into the system net whose operational channels remain unchanged; 2) learning--feedback of new external data for the changing of these operating channels themselves, that is, a change in the structure of the system; and 3) consciousness, or "self-awareness"--feedback of new internal data via secondary messages, messages about changes in the state of parts of the system itself. These secondary messages serve as symbols or internal labels for changes of state within the net. Finally, four successively higher orders of purposes can be recognized: 1) seeking of immediate satisfaction; 2) self-preservation, which may require overruling the first; 3) preservation of the group; and 4) preservation of a process of goal-seeking beyond any one group. These orders of purpose, of course, require successively higher-order feedback nets.[61]

E. Differentiation. In terms of an open system in which there are true self-regulating feedback loops, there is a higher level of interrelations of parts, or a move in the direction of

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[60]Paul Watzlawik, J.H. Beavin and Don D. Jackson, Pragmatics of Human Communication (New York: Norton, 1967), p. 3.

[61]Karl Deutsch, "mechanism, Teleology, and Mind," cited in Buckley, op. cit., pp. 56f.

differentiation or elaboration. These kinds of systems are more complex and dynamic than closed equilibrial systems. These systems involve "some degree of learning, purpose or goal-seeking, elaboration of organization or evolution in general" and as such are higher level adaptive systems.[62] For example, the growth of the personality proceeds from primitive, crude organizations of mental functions to hierarchically structured and well-differentiated systems of beliefs and feelings. Social organizations move toward the multiplication and elaboration of roles with greater specialization of function.

F. A system as a Gestalt. Another property of systems is that they are always characterized by some degree of wholeness. Every part of a system is related to every other part and a change in one part will cause a change in all parts and in the total system. This is to say that a system does not behave as a simple composite of independent elements, but rather the parts being interdependent and interrelated behave coherently and as an inseparable whole.

A similar concept in systems theory is that of nonsummativity, meaning that a system is not and cannot be taken merely as the sum of its parts. Analysis of only the parts would miss the gestalt as well as the core of its complexity, namely, its organization.

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[62]Ibid., p. 70.

G. __Morphogenesis.__ A law ef nature is the entropic process
in which all forms ef orgnaization, biological and sociological, move
toward death or disorganization. To survive, open systems must
arrest this process through "negative entropy." This is achieved by
an open system by importing more energy from its environment than
it expends and by storing this energy. It is clear that a system is
not independent ef its situation or environment, although it does
have "self-regulating" and "self-organizing" factors.

There are two basic processes that refer to the interdepen-
dence ef a system and its environment: "morphostasis" and "morpho-
genesis." Morphostasis "refers to these processes in complex system-
environment exchanges that tend to preserve or maintain a system's
given form, organization, or state."[63] Examples ef morphostasis
are "homeostatic processes in organisms, and ritual in sociocultural
systems."[64] These are the kinds ef processes referred to in dealing
with closed systems, stationary equilibrium, homeostasis, and neg-
ative feedback. "Morphogenesis," on the other hand, "refers to these
processes which tend to elaborate or change a system's given
form, structure, or state. . . . Biological evolution, learning and
societal development are examples of morphogenesis."[65] In

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[63]Ibid., p. 58.

[64]Ibid., pp. 58f.

[65]Ibid.

morphogenesis it is the process of positive feedback that provides insight into the mechanisms underlying structure-building. Morphogenetic processes are characteristic of open systems and it is precisely these processes that account for complex systems being adaptive.

The morphogenetic process, then, is a developmental process with basic assumptions about potentialities of an open system for development, growth, and change. Any existing "quasi-stationary" stability is but a snapshot of a living process, a stage that will give way to another stage. The direction of change, usually derived from the system, is toward some goal—a goal that in itself is not static, but may be ever enlarging.

H. Hierarchy-of-systems. The components of a system may be simple or very complex, and by definition are all interdependently related. Each system is made up of subsystems which may or may not be composed of sub-subsystems. To state another way, a system together with other related systems is a subsystem of a larger system. While we might be overwhelmed at the complexity of systems as well as the numbers of systems, the concept of hierarchy-of-systems allows us to act without becoming paralyzed by infinite complexity. The idea of this concept is that in order to act effectively in response to what is going on, it is not necessary to know all that can be known about every potentially relevant system, nor about everything which has a conceivably important

effect on what we are interested. If we know who we are, our role, our capability, and have established goals, we can then select to analyze those systems whose internal condition is something we can and want to do something about. We are aware of those systems external to those we are interested in and take into account how they influence the systems on which we are focusing.

> The hierarchy-of-systems idea, then, . . . allows us to treat some systems as external environment, some as the producers of internal effects and some in the full complexity necessitated by the nature of our goals, responsibilities, and skills. The idea of system, in a sense, frees us from the compulsion to oversimplify by making the complexity that is characteristic of human behavior in organizations conceptually manageable. It also urges us, by insisting that we define the focus of our study before we begin analysis, to clarify our role and to admit to the limits and strengths of our abilities to act.[66]

The above brief summation of modern systems theory provides the conceptual framework which promises to get at the full complexity of the interacting phenomena of mental and spiritual well-being and provide means for the analysis of change and of changing human processes. While the social scientist would use systems theory mainly as a tool to study how a system works and to predict what would happen if a new factor were imposed, the change-agent is a practitioner and moves beyond the theoretical model. The test for any model of change must take into account stability and continuity of events studied, location of the "source" of change, how goals and directions are determined, what handles are provided for affecting change, and

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[66]Seiler, op. cit., p. 9.

what is the place of the change-agent.[67]

In an open system model, equilibrium accounts for stability,
but it is a "quasi-stationary equilibrium," accounting for its
continuity. Implied from the dynamic equilibrium concept is how
change evolves out of the incompatibilities and conflicts within the
system and its adjustment and adaptation to inputs from without.

> A system model assumes that organization, interdependency, and
> integration exist among its parts and that change is a derived
> consequence of how well the parts of the system fit together,
> or how well the system fits in with other surrounding and
> interacting systems.[68]

The location of the source of change is tension, which
lies within the stress and strain of a system, be it caused internally
or imposed externally. Tension is vital to a system in that growth
and change of a system is facilitated through tension reduction. The
change-agent is not necessarily one who works to help reduce tension,
but through analysis may stimulate a system with stressful input,
utilizing tension and letting the process of tension reduction
change the system, hopefully in a positive direction. Hence, this
calls for the necessity, therefore, of careful analysis for stress-
ful input. It is possible that after tension is created that the
system will come back to the same state of equilibrium. Kurt Lewin
suggests that a successful change includes three aspects: "unfreezing

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[67]Chin, op. cit., p. 212.

[68]Ibid.

(if necessary) the present level . . . moving to the new level . . . and freezing group life (the system) on the new level"[69] via feedback mechanisms and further input.

The determination of goals and direction must be viewed in light of what kind of system is involved. They may emerge from the structures or from imposed sources. In terms of organizations, goals may be set autocratically, or by "invested interests" of one part of a system, or by a process of collaboration by all parts of a system. In terms of persons, goals may be "natural" and that change is rooted in the very nature of life. In this sense the goal is determined ontologically.

The handles that are provided for the change-agent are, in part, recognition of the stresses and strains, the symptoms of which are "difficulties of adaptibility (reaction to environment) or of the ability for adjustment (internal equilibration)."[70] Further handles are the use and control of "inputs" to the system, especially utilizing feedback mechanisms as well as forces tending toward equilibrium.

As the change-agent, himself, he may be an analyst outside of the system involved, or perhaps partly in the system, or even an active participant within the system, Again this would be

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[69]Kurt Lewin, op. cit., p. 237.

[70]Chin, op. cit.

determined by the situation.

A further test for open systems theory is its implicit view of man, understanding of personality, and the nature of the universe. As will be discussed in the next chapter, man is viewed as an open system in direct relationship with his environment. This view of man implicit in open systems theory, stands in contrast to the quasi-closed, mechanical view that we have inherited from nineteenth century naturalism, which influenced Freud and is by and large maintained by the medical model today.

3. A Triadic and Collaborative Model.

It seems evident from the Joint Commission's report and others[71] that the mental health problems of modern society cannot be adequately handled by existing professional resources. The demand for professional specialists is great and the trend, as Albee has suggested, is that shortages will become greater over time. Some means of amplifying our mental health manpower structure is urgently required. A partial solution is to turn to the recruitment and training of nonprofessionals and para-professionals for mental health functions. A further help would be to expand the role of the professional to include consultant function and training of nonprofessionals.

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[71] R.H. Felix (ed.), Mental Health activities and the development of comprehensive health programs in the community (Washington: U.S. Dept. of H.E.W., 1962).

Volunteer workers are not new in the area of mental health. On the other hand, the use of volunteers has been in the main haphazard. Under the rubric of volunteer we would include the occasional volunteer, who is willing and able to give time, commitment, and genuine involvement. In some instances, volunteers are paid a small sum to motivate their continuing; e.g., phone answerers of Skagit Valley Hot Line. Careful attention should be given to recruitment, training, and supervision of the non-professional.[72] If the role of the nonprofessional is taken seriously, as well as the problem of continued motivation, his roles and functions should be meaningful ones and not simply dusting and keeping shop. If new roles are carved out for the nonprofessional, then it would follow that there would need to be some rethinking concerning the roles and functions of the professional.

The serious use of nonprofessionals in mental health raises a couple "sticky" issues, that most would lkke to keep hidden. First, the medical model with its doctor-patient relationship despairs of the use of paraprofessionals. The basis of this model with diagnosis and treatment could not be in any way left to anyone other than a qualified person, namely, a doctor. Nonprofessionals lack professional knowledge, would be unpredictable and might have

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[72]See Janice R. Neleigh, and others, _Training Nonprofessional Community Project Leaders_ (New York: Behavioral, 1971).

deleterious effects upon the patient. Also graduate training is long and arduous involving ten to fifteen years of training beyond high school. To many professionals, this is too much invested to let some nonprofessional, maybe with only one or two years of college, perform any of the functions that are labeled "professional." Margaret Rioch, however, in a project beginning in 1958, successfully trained housevives to function as psychotherapists in Washington, D.C. These were bright, middle-aged housewives with a bachelor's degree. The training period lasted for two years. The results of the project demonstrated that important jobs at a professional level can be filled by superior people with less formal training than is usually required.[73]

This raises the second issue, what attributes lead to positive change of behavior? What is meaningful in helping people? Is the effective change agent only a well-trained, qualified professional?

E.G. Poser, in another important study in 1966,[74] compared the effectiveness of untrained college undergraduates and experienced professionals as group therapists with chronic, hospitalized adult male schizophrenics. The results were clear. Those treated improved significantly more than those not treated. While improvement

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[73]Margaret Rioch, E. Elkes, and A.A. Flint, National Institute of Mental Health Pilot Project in Training Mental Health Counselors (Washington: U.S Dept. of H.E.W., 1965).

[74]E.G. Poser, "The Effect of the therapist training on group therapeutic outcome," Journal of Consulting Psychology, XXX (1966), 283-289.

varied, those seen by lay therapists showed greater gains than those

treated by profsssionals. A three year follow-up evaluation showed

the changes brought about by the lay therapists to be stable. While

the study may be challenged on some grounds, one is hard-pressed

to explain these results. Poser hypothesized that the critical

change agent may well have been the interest, enthusiasm, and energy

which the students brought to the situation--variables that do

not belong only to the professional.

In the psychotherapeutic model, the professional special-

ist interacts with the patient. In this dyad relationship, the

change agent relies on verbal responses to produce behavior change.

In most theories the therapeutic intervention is intrapsychic in

nature, aimed at removing inner blocks so that potentialities of

man can flow forth in a personal growth process. It is assumed

that change comes about by dealing with thoughts and feelings to

arrive at insight, and, thereby, be able to change attitudes.

With the change of attitutes it is assumed that new behavior will

follow. One of the limitations of this approach is that there is

little concern for the importance of the environment. Bandura,

McGuire, and others reviewing attitude change show that there will

only be temporary effects unless the change in attitude is maintained

by sustaining stimuli, which means that there must be changes in

one's environment to support the new attitude.[75] A further diffi-

culty in the intrapsychic approach is that its theory is tech-

nical, difficult, and esoteric. Translation from the clinical

office to the dealing with day-by-day realities is a jump that often

fails. Also because of its esoteric nature, it is also difficult

for the professional therapist to guide the nonprofessional person

in helping people.

Another limiting assumption about change in the psychothera-

peutic model is to view the one seeking help as the patient, as

being sick. While labeling one "sick" is an advance over labeling

one wicked or evil, the assumptions that follow from being sick (men-

tally) are similar to being physically ill. Consequently, less is

often expected of him in terms of energy and responsibility. This

can be a gross dehumanization of the "mentally ill," as in many res-

pects, it is more degrading to be removed from responsibility for

one's behavior than to be punished for it. As the Puerto Rican

gang in Westside Story, when, after having been analysed by psy-

chologists, sociologists and others trying to explain away their

delinquent behavior, they themselves, hung onto the last remaining

thread of humanity by saying of themselves, "we are no damn good."[76]

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[75]A. Bandura, Principles of behavior modification (New York:
Holt, Rinehart and Winston, 1969); W.J. McGuire, "Nature of atti-
tudes and attitude change," in Handbook of Social Psychology (Menlo
Park: Addison-Wesley, 1968), III.

[76]In song "Officer Krupke" in musical Westside Story.

Far too many have been persuaded that their behavior and exper-
iences are distorted manifestations of their diseased mind. To get
help is often costly in terms of one's self-regard as he must ack-
nowledge his helplessness and renounce his independence and self-
sufficiency. Further, having to rely on verbal intervention, the
therapist always has an out in that the patient cannot be treated
unless he "wants help."

William Glasser's approach of reality-therapy is a healthy
step away from this dilemma as his focus shifts away from thoughts
and feelings to that of behavior and dealing with the present, day-
by-day responsibilities of the individual.[77] The emphasis is
toward responsibility, rather than at the expense of responsibility,
in which the individual learns to develop and recognize his abili-
ty to cope with his situation in a responsible, realistic manner.

It should be noted that we do not mean, by this argument,
to deny that physical or organic disorders of structure and function
cannot affect behavior. Endocrinological and nervous system disor-
ders can directly affect behavior and it would be unwise to over-
look these potential components when helping techniques are being
formulated. On the other hand, to assume that all behavioral

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[77]William Glasser, Reality Therapy (New York: Harper &
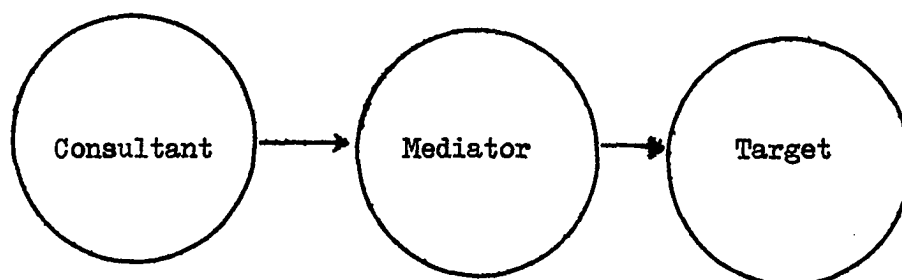Row, 1965).

disorders should be managed by the illness conceptual and operational model is equally unwise.

In terms of facilitating positive change in behavior, it is becoming clearer that the promise of the medical model has been greater than its achievement. An alternate point of view to the intra-psychic view of behavior with treatment being a dyad, one-to-one relationship between therapist and patient, is the community mental health perspective which views behavior largely as a function of the external natural and social environment. This opens doors to new vistas in terms of treatment. For example, returning to the issue of the paraprofessional and non-professional, the community can be marshalled together in the therapeutic endeavor. This amounts to the delegation of responsibility in prevention, detection, and treatment. The community, itself, would disperse responsibility to individuals and agencies not traditionally thought of as part of the helping profession: family members, teachers, ministers, bar-tenders, police, unions, gang members, and all other individuals and agencies that make up the social environment of the individual. Such delegation would not be allowed in the illness model. The very words themselves, illness, health, disease, therapy, treat-ment, and detection, suggest that anything less than professional action is inappropriate. While the dyad form of treatment may function satisfactorily with some people in the proper setting, it cannot be maintained as the basic model for operation in a community setting. An alternative to the dyad form of treatment is the

triadic model as suggested by Tharp and Wetzel, behavioral psy-
chologists.[78]

To the casual observer there might appear to be two dif-
ferent forms of the triadic model of treatment. One form, however,
is more accurately a collaborative dyad mode. Rioch's study, for
example, in which housewives from a community were trained to be
therapists in a relatively short period of time, is still basically
a dyad model, only deprofessionalized. This dyad model, however,
can be expanded to a collaborative dyad, in which people such as
bartenders, teachers, clergymen and others can be trained to recog-
nize early symptoms of possible disorder and refer to appropriate
sources for treatment. Or these same people may do some therapy
with rather simple problems in collaboration with a professional.

The other form is the pure form of the consultative triad.
As shown below,

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    ┌──────────┐      ┌──────────┐      ┌──────────┐
    │          │      │          │      │          │
    │ Consultant├────→│ Mediator ├────→│  Target  │
    │          │      │          │      │          │
    └──────────┘      └──────────┘      └──────────┘
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[78]Roland G. Tharp and Ralph J. Wetzel, Behavior Modification
in the Natural Environment (New York: Academic Press, 1969),
pp. 45ff.

all effects proceed to the target via the mediator, not directly
from the consultant to target. This analysis describes func-
tional positions, not the people who occupy those positions.
For example, any number of individuals occupying any number
of social roles might serve as mediator: Father, teacher, sis-
ter, minister, mother, employer, friend, and psychotherapist.
Indeed, the same is true of the functions of either consultant
or target.[79]

The "consultant" is basically anyone or anything (e.g., a computer)

with the knowledge. The "mediator" is anyone or any structure with

the "reinforcers", and who receives instruction from the consultant

which he uses to affect the target. The "target" is anyone with

the problem being considered or any social system that is the

focus of change.[80]

The basis of change is through the use of "reinforcers",

which are "those consequences of a behavior which strengthen and

weaken it as they are presented and withdrawn."[81] Reinforcers lie

within the environment of the individual and "are imbedded within his

social nexus: whether the reinforcer is a smile or a candy, a bicy-

cle or a slap, reinforcement is frequently dispensed by people artic-

ulated into the individual's social environment."[82] The basic means

of intervention is a simple one: "the rearrangement of contingencies

(environmental rewards and punishments which strengthen or weaken

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[79]Ibid., pp. 46ff.   [80]Ibid.

[81]Ibid., p. 3.   [82]Ibid.

specific behaviors) so that undesirable behavior is no longer re-warded, and desirable behavior is rewarded."[83]

The entropic process, that a system moves towards death unless there is continual input to sustain it, also applies to behavior. A deviant behavior must be reinforced or it too will die with atrophy. The triadic model recognizes this and utilizes this dynamic to facilitate change. This model also recognizes the power-ful influences of the natural environment upon the individual and provides conceptual means to change the natural environment and thereby, hopefully, bring about changes in the target's behavior and/or support changes already taken place in the behavior of the target. In terms of changing attitudes, this approach is the reverse of the intrapsychic approach in that attitudes may be effec-tively changed by changing overt behavior first. While many ap-proaches have assumed it is necessary to change attitudes first to get effective behavior change, the empirical evidence supports the converse.[84] Attitude change is important to give a lasting basis for new behavior.

While much more could be said concerning the details of this triadic model, such as choice of mediators, source and control of reinforcements, and interrelationship of the three functional

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[83]Ibid.

[84]See E.E. Jones and H.B. Gerard, Foundations of social psychology (New York: Wiley, 1967); McGuire, op. cit.; Bandura, op. cit.

positions, what is important to note at this point is the triad
model itself. This provides a further handle to our community mental
health model for the pastor as change agent. The dyadic model is
basically treatment apart from the community, while the triadic
model lends itself to treatment in the community, by the community.
It also supports what is increasingly recognized socially, politically
and professionally that the real potential for helping and for be-
havioral change lies in the natural environment.

The triadic model, then, can help the pastor to move beyond
the one-to-one framework and begin to see himself as a consultant,
or his church board that concerns itself with the church's ministry
as consultants--and when focused on a target, be it a person or a
social system, can find the mediators that would be most influential
(input) in reinforcing the target's behavior (output). The triadic
model provides the pastor with a conceptual direction to bring about
change, be it in persons and/or their natural and social environment.
Also church members and other community members are all possible
change agents as mediators. Theologically, if members become both
mediators and targets, the Protestant Reformation concept of
"priesthood of all believers" becomes a reality in terms of pastoral
care--each a spiritual and mental health counselor to the other--
together each member constitutes part of the natural environment,
i.e., the church community, which reinforces each member's actions.

4. Primary concern: primary prevention

Pastoral care has always concerned itself with the care of souls. As pastoral care further developed by drawing upon the resources of psychology, pastoral counseling evolved as a healing process to help the pastor in his task of the cure of hurting souls. Pastoral counseling has become almost solely a treatment model to the neglect of prevention. Treatment is important and always will be as there will always be individuals in need of help. The traditional one-to-one treatment will be effective with some people; however, viewing man-in-environment, as a major program strategy it is ineffective in reducing the total amount of community mental ill-health. In developing our community mental health model for pastoral counseling, it is our position that primary prevention is not only a possible emphasis within mental health and the role of the pastor as counselor, "it is the only defensible emphasis if the field is to escape from the impossible task of trying to prevent emotional disorders by treating them wholesale once they have manifested themselves."[85] Treatment, then, must be viewed through the lens of prevention.[86] As John Snyder reports,

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[85]Gershen Rosenblum (ed.), Issues in Community Psychology And Preventive Mental Health (New York: Behavioral, 1971), p. x.

[86]Prevention strikes one as having negative overtones—preventing mental disorder. It fails to suggest the positive meaning attributed to it, "creating health." However, this writer will remain consistent with this term from community mental health literature.

> Too often, pastoral counselors are like a group of men at
> the bottom of a cliff. People are stumbling off the cliff and
> getting hurt. . . . We (as) clergymen have something unique
> to contribute . . . in the whole business of prevention.[87]

The concept of prevention has been long used in public

health, but only applied to community mental health within the

past decade. Gerald Caplan developed this concept both theoretically

and practically. Using the same terminology of public health, he

conceived of "primary," "secondary," and "tertiary" prevention.

Prevention is

> to plan and carry out programs for reducing (1) the incidence
> of mental disorders of all types in a community (primary preven-
> tion), (2) the duration of a significant number of those dis-
> orders which do occur (secondary prevention), and (3) the im-
> pairment which may result from those (tertiary prevention.)[88]

A. <u>Primary Prevention</u>. Primary prevention of mental and

emotional disorders "is any specific biological, social or psycho-

logical intervention that promotes or enhances the mental and emo-

tional robustness or reduces the incidence and prevalence of mental

or emotional illnesses in the population at large."[89] Primary

prevention is clearly a community concept.

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[87]John Snyder, "Clergymen in a Preventive Mental Health
Program," in Clinebell, <u>Community Mental Health</u>, p. 79.

[88]Gerald Caplan, <u>Principles of Preventive Psychiatry</u> (New
York: Basic Books, 1964), pp. 16f.

[89]Eli Bower, "Primary Prevention of Mental and Emotional Dis-
orders: A Conceptual Framework and Action Possibilities," in Arthur
Bindman and Allen Spiegel, (eds.), <u>Perspective in Community Mental
Health</u>, (Chicago: Aldine, 1969), pl 239.

Critics raise the question, "What is it that you are trying to prevent?" Some claim prevention has the sound of "magic" and is merely the latest "therapeutic bandwagon."[90] Dunham suggests that how can the "collectivity" possibly be treated when there is still so much uncertainty to the psychiatric treatemnt and cure of the individual?[91] The last criticism may be saying more about the effectiveness of the individual psychiatric treatment than about community mental health. It is true the conception of prevention might have the ring of "magic" if one thinks that little can be accomplished short of a major social overhaul, such as removing all injustice, poverty, etc. Clearly, those speaking about primary prevention are not grandiose and well realize their limitations as well as recognize the limitations of their critics who would rather "work at the bottom of the cliff." A good point, however, is implicit in the criticism, that goals do need to be set and defined when we speak of prevention.

This brings us back to the knotty problem of defining the goals of prevention--what are we trying to prevent? If we lack specificity as to what constitutes mental illness, how can we prevent it? This is a negative approach. Positively, by our above definition, the major goal is to "promote or enhance mental and

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[90] See H. Warren Dunham, "Community Psychiatry: The Newest Therapeutic Bandwagon," in ibid., pp. 54ff.

[91] Ibid., pp. 58f.

emotional robustness." As Dubos notes:

> Solving problems of disease is not the same thing as creating
> health.,. . . This task demands a kind of wisdom and vision
> which transcends specialized knowledge of remedies and treat-
> ments and which apprehends in all their complexities and
> subtleties the relation between living things and their
> total environment.[92]

This gives a positive connotation to what is meant by primary

prevention. While we may not be able to fully define or all agree

on what constitutes mental health, as defined earlier in this paper,

there are enough positive characteristics of mental health stated

and agreed upon that some goals of primary prevention can be defined.

Admittedly, not all the answers are known, nor all the goals clearly

defined. However, as we increase our understanding of the person-

in-community--i.e., the interactions whereby the community shapes

his development, introduces stress into his life, and mediates

the ways in which the emotional hazards of living are dealt with

for better or worse--we will be better able to state more clearly the

goals of prevention. The community, then, is one key to primary

prevention. As one writer states, "As we shape the community towards

meeting the needs of individuals for safety, security, and personal

significance throughout the life cycle, we become truly engaged

with mental _health_ rather than mental disorder."[93]

Person-in-community, while a unitary concept, means that

there is an interdependence between man and his natural environment.

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[92]Bower, op. cit., p. 236   [93]Rosenblum, loc. cit.

There is equilibrium between the two, which through tension and conflict, the morphogenetic principle keeps both in process. There must, however, be continual input or the entropic process in inertia table. In terms of mental health, person-in-community is in need of "continual 'supplies' commensurate with his current stage of growth and development."[94] Caplan classifies these supplies into three groups:

> Physical supplies (which) include food, shelter, sensory stimulation, exercise, (etc.). . . . Psychosocial supplies (which) include the stimulation of a person's cognitive and affective development through personal interaction with significant others . . . (and) Sociocultural supplies (which) include those influences on personality development and functioning which are exerted by the customs and values of the culture and the social structure.[95]

There must be continual input of these supplies or crises arise, the resolution of which may move the person up or down the road of mental well-being. There are two levels understood by Caplan: 1) the long-term view of the continuing factors which mold the development of a person's general life style and 2) the short-term view of the recurrent crises associated with sudden changes in patterns of behavior.[96]

"Crisis theory" provides the basis for intervention. There are two basic kinds of life crises: developmental crises, e.g., Erikson's eight stages of development, and accidental crises, which

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[94]Caplan, op. cit., p. 31.   [95]Ibid.,p. 32.

[96]Ibid., p. 30.

are life hazards that threaten basic life supplies. Characteristic
of a life crisis is increase of tension. If the crisis cannot be
resolved the tension increases to the point of causing major dis-
organization of the individual. Crises most often are resolved with-
in a six week period. If an individual was unable to resolve the
life crisis adequately, this will have a considerable significance
for his future mental health.

Life crises will occur, in fact are necessary for growth.
Cumulatively, successful crisis resolutions result in increasing
emotional well-being. The pastor is in a position to have many
opportunities for constructuve primary preventive intervention
around both developmental life crises and unexpected crises.[97]
There are two directions in which a pastor can intervene. One, is
intervention with the individual increasing his resistance to
stress-inducing psychosocial forces within the community. The
second is to reduce these stresses by intervention within the
community.

There are various tactics that professional mental health
workers have developed regarding primary prevention techniques.
The following three are useful for the clergyman. First, the

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[97]For other articles concerning pastoral counseling and life
crisis theory, see Homer L. Jernigan, "Pastoral Care and the Crisis
of Life;" Paul Pretzel, "The Clergyman's Role in Crisis Counseling;"
and Donald Bushfield, "A Church-Sponsored Crisis in Counseling Ser-
vice," in Clinebell, Community Mental Health.

pastor and the church could have significant community-wide impact if they pick their spots, identifying persons in crisis and intervening briefly at those moments when such persons can be helped to resolve the crisis in a favorable manner; e.g., supporting a family whose home burned down. A second tactic is one of "anticipatory guidance," which is the pre-solution of anticipated crises. The most common method utilized thus far in churches has been the group meeting, such as a premarital group of engaged parishioners meeting with the pastor. A third tactic is utilization of the triadic model of pastor as consultant. For example, a county public health nurse asked this writer and pastor to speak to six nurses (Caucasian) and six Spanish-American volunteers who were to work together to provide medical aid during the summer months when two thousand migrants move in to help farm. The volunteers were to be mediators between the migrant people and the nurses as the migrants did not trust the Caucasian nurses. While speaking it became obvious that this same barrier existed between the volunteers and nurses, and pointed out their effectiveness would be hampered because of it. An all day workshop to work at bridging this barrier was immediately scheduled in their training program. This pastor used his skills as facilitator, or consultant, to lead the workshop aimed at their interpersonal relations and at establishing trust. In a follow-up session a few weeks later, it was evaluated by the nurses and the volunteers that the workshop was the turning point, that bridging

their own barriers of mistrust, they felt more effective in bridging these same barriers with the migrants.

When intervening, it is one thing to increase people's resistance to stress, but it is quite another to identify the recipients with whom to intervene. One approach has been to aim preventive programs at a total population in a defined geographic area. Floridation of water is an example in public health. In mental health, a church might select a two square block area that is physically run down and mobilize the people to clean it up, thereby improving their living area, one of their physical supplies, as well as bringing people together for action. A second approach is a "milestone program," in which a preventive service can be given to those who have or will shortly reach a particular developmental crisis in their life. A church might offer a "human sexuality" course to those who are the onset of puberty, or maybe a small group on parenting for expectant parents. There are any number of programs that can be established to help people prepare for their next stage of life. Another anticipatory approach is to identify those groups of persons whose life crisis is at a high risk point in terms of their mental health. For example, a church might aim a program at parents, particularly housewives, whose youngest child is about to leave home; or for those who are about to retire; or for expectant mothers and post-natal depression; or for men who are forty and now know they may never achieve that high ideal they had set for themselves and are thus experiencing a spiritual crisis.

While intervention with the individual and person-oriented programs may seem indirect and limited in their influence in the community, its impact on the total community can be impressive. Any input into a system affects the whole system. If individuals can be assisted in increasing their resistances to stress and, consequently, be better able to cope with their environment, the welfare of the whole community is improved, which in turn positively supports the individual.

Primary preventive intervention with the individual to help strengthen him, must be accompanied by also trying to reduce stress-inducing psychosocial forces within the community. As Keniston puts it:

> One reason the unrest of youth eludes psychological categories may be psychiatry's stress on the inner world and on those modes of adaptation that Heinz Hartmann has called autoplastic --efforts at self-change, at insight, at adaptation to the new environment. Too little attention has been given to the positive value of alloplastic adaptations, which try to make the world a more livable place, to create new life styles, to change others.[98]

Pastors as change agents, then, must concern themselves with modification of community, which means they will have to be aware of and look to the social sciences for help.

Intervention with the community is based upon a set of assumptions about which we ought to be clear. First, man and

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[98] Kenneth Keniston, "We have to learn from Youth," _American Journal of Psychiatry_, CXXVI, (1970), 1767f.

community are viewed as a unitary concept, a complex system in which

parts are identifiable, but are interdependent. Second, as Keniston

suggested, while some sources of psychopathology are within man

himself, other sources are within the social systems in which he

lives. Third, it follows that prevention will require more active

involvement of the pastor and church within the community. Fourth,

since prevention will require some changes of those social systems

which cause disability and feed mental ill-health, in an effort, then,

to prevent or limit these disabilities some forms of social or

political action are going to be required. Fifth, a more compassion-

ate view of community with its strengths and weaknesses is needed.

In this view a community is seen not as consisting of givers and

takers but as interdependent people all of whom have needs which

can be met by others and who have contributions to make to others.[99]

Similar to the sheriff who jested a psychiatrist asking if it were

true you had to be a little crazy to be a good psychiatrist and who

in turn was asked if it were true you had to be a little crooked to

be a good sheriff, the pastor as a preventive counselor must be

suspicious, always on guard for potential disability and possible

preventive intervention. This includes not only the obvious, such

as the effect of low socioeconomic status with its poverty and poor

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[99]See S. Blackman and K.M. Goldstein, "Some Aspects of a
Theory of Community Mental Health," Community Mental Health Journal,
IV (1968), 83-90.

such as loss of parents, job dissatisfactions, unhappy marriages, and lack of a meaningful social role.

Specifics as to how a paster or church might intervene in the community are many and depend upon the particular parish and each community, as each has idiosyncrasies of its own. To offer an example of a socio-therapeutic approach as a possible direction, there is much about Frank Riessman's Neighborhood Service Center program that is applicable for churches as a neighborhood-based mental health approach.[100]

Community action approaches fail for a variety of reasons, some of which include failure to focus on specific targets, neighborhoods, and problems; failure to combine service with other approaches, such as self-help community action; the service was too narrowly defined; or the services were too middle-class oriented and out of reach of low-income people.[101] Therefore, it is important that if a church is to move into community action, its program must have a clear target as well as achievable objectives. Some of these objectives ought to be achievable in a reasonable period of time so that the people in the program do not get discouraged.

The heart of a preventive social change program, for example, reaching unemployed, hungry people, is "service-oriented,"

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[100]Reissman, op. cit., pp. 162ff.

[101]Ibid., 169.

> beginning with service to the individual, many of these in-
> dividuals can be encouraged first to parcicipate in informal
> social groups, later in more formal service groups and
> task-oriented groups, and finally, in various types of com-
> munity action and intergroup activity.[102]

It is through individual services that the target population enters

the system. In Seattle this past year, due to high unemployment

and welfare benefits running out, many families were without food.

The churches formed a foodbank. As the program progressed the clients

were encouraged to become involved in mutual and reciprocal rela-

tionships with other people who were in similar need. Those seeking

help were transformed into helpers, which were needed as the

foodbank grew into a larger formal operation. These helpers were

workers as well as "bridge" people who were able to communicate

with the neighborhood people as well as those offering the service.

This is a further example of our triadic model. The basic community

norms of communality, mutuality, and reciprocity were established and

maintained. Task-oriented groups were formed to move the food,

prepare it, get it to those in need, and seek outside food resources

from farm surplus in Eastern Washington. The news media was

utilized to get the word to the community. Pressure groups were

organized to pressure Seattle City Council, State Legislatures and

Federal Congress. Their success brought a subcommittee of three

congressmen from Washington, D.C., to investigate their need.

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[102]Ibid., p. 166.

What started as a small stop-gap operation developed into a community action program. One of the reasons for its success was that those in need were not at the short end of the stick of the debilitating stigma of only receiving help, but were given the opportunity to feel some power through their own participation in self-help community action.

There are many variables in any community action program. A couple are worth noting from the above illustration. "Leighton (1965) has noted that more integrated communities appear to be less subject to mental stress and mental illness."[103] Social cohesion, then, is one community variable that might be treated, but it does not affect all types of disorder equally. As a rule, however, "increasing cohesion should not only limit pathology but should also provide increased positive mental health, greater autonomy, independence, and the like."[104] Social cohesion was achieved in the Seattle Churches' foodbank program providing prevention from a whole host of possible ill-effects, physically, emotionally, and behaviorly, that could happen to families who are hungry. In terms of mental health, then, the sociotherapeutic goal of a neighborhood service-oriented program is the development of cohesion, involvement, and independence and the reduction of isolation, apathy and powerlessness.[105]

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[103]Ibid., p. 172.   [104]Ibid.   [105]Ibid., p. 173.

Another variable is the recipient himself. Some people are hesitant to get involved and remain inactive. Others are more aggressive and only need a channel to act out. Saul Alinsky's approach of stimulating a conflict aimed at some local enemy, is one such way that the more aggressive and militant can organize. There is always danger in such an approach of not channeling the anger that may possibly erupt into violence. A further criticism is that it is questionable how much of the neighborhood is even represented in such an approach since it only takes a low percentage of people in a community to organize to bring about change. The service-oriented approach is one that can draw out the inactive, hesitant person to gradually get involved ind thereby perhaps get a wider segment of the community involved.

Primary prevention, then, with its intervention with both the individual and the community, becomes one of the central aspects of our community mental health model for pastoral care and counseling. Prevention is not only trying to prevent possible mental ill-health, but also has a positive connotation of trying to create sound mental and spiritual health. This is well within the bounds of the function of the church as it has been one of the major social institutions that has defined how people should see themselves and direct their behavior.

B. Secondary and Tertiary Prevention. Secondary prevention concerns itself with trying to lower the duration as well as the

number of disorders which do occur. People are going to fall off
the cliff, whether they step over or are pushed. The main concern
here is diagnosis and treatment. In terms of prevention, the earlier
the diagnosis and the quicker the treatment, better are the chances
for effective treatment.

According to the Joint Commission's Report on Mental Health
in 1961, forty-two percent of the people seeking help first furned
to a minister or rabbi. This is for some rather obvious reasons,
as Pattison suggests: because clergy far outnumber other helping
professionals, are more widely scattered, readily available, less
expensive, and well known by the people.[106] These are distinct
advantages of the clergyman and is the need to which the discipline
of pastoral counseling responded. With the clergyman being on the
front lines, so to speak, pastoral counseling has provided him the
tools for diagnosis, treatment approaches, and referral techniques.
The model of pastoral counseling, which this dissertation is attempt-
ing to broaden, is well grounded in what is called "secondary pre-
vention." For this reason we will limit our discussion of this
aspect to the above.

Tertiary prevention is concerned with helping the person,
who for some reason was removed from his community, be it to a mental
hospital, to a prison, juvenile hall, military service, etc., now

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[106]E. Mansell Pattison, "An Overview of the Church's Role in
Community Mental Health," in Clinebell, op. cit., p. 23.

needs help to find his place back into the community. It is basic that such a person receive acceptance, support and assistance. The church is one major institution that can be such a liaison. For example, I worked with a group of single young adults in downtown Los Angeles. There was considerable turnover in the group. Most who came were hurting and lonely. Some were military men, others just released from duty, some just out of a mental hospital, others lost a husband or wife through divorce--all of whom were more or less "dumped" in downtown Los Angeles. They needed a group's support and acceptance. Many also needed assistance to find a place to stay, something to eat and a job. Usually within six months to a year many were able to regroup their inner forces and moved to new locations, with new jobs and a brighter future. The church has long been in the business of tertiary prevention of providing a community of human relationships.

5. Locus In Community

The importance of space has been underestimated both in psychology and sociology. Space, which can become localized to a place, is a very important dynamic in all of life, from the time of occupied space in the womb, to the space occupied in mother's arms and the crib, to space of one's bedroom, classroom, play yard, to owning property to create the kind of space one likes to have around himself. Also the interrelationship of spaces is important. If you ask an "old-timer", who often speaks of the "good old days" and the

community church he attended when he was a boy, to describe his church, he invariably talks about a room, or the steeple, or a picture hanging over the altar, but fails to mention the people who made up the church. In reality the church is a group of people and not a building, but the dynamics of spatiality must not be overlooked.

Directly connected with space is what occupies the space. Very important in an individual's life is the space occupied by the significant people in his life. Home is an important spatial concept to most people, yet what makes home special is the people in it, namely, "mom" and "dad". After one grows up and leaves home, and if by chance the parents should also move to a new house, home no longer is the old house, but home is where "mom" and "dad" live. Where they live becomes the hallowed sanctuary of "home".

This same dynamic operates when one considers the healers and helpers in society who become important to those who are being healed or helped. The place where one receives the help becomes a sanctuary. The sanctuary of the family physician is the medical center and the hospital. The sanctuary of the psychiatrist is the clinic in which he works. The locus of salvation becomes identified with the place and in the space in which the one bringing healing works.

As our community mental health model becomes a reality, the present spatial concept of the church building as the locus of salvation will hopefully shift so that the locus will become the

the community. The command of "Go ye all into the world" will become all the more a reality. The pastor will not only be identified with his church building, but as an integral part of the community.

A shift of locus does not mean that we simply put "old wine in new bottles." Unfortunately, some of the hopes that John F. Kennedy had in his historic presidential message of February 5, 1963, that "prevention is far more desirable for all concerned," and other comments concerning prevention, have not been realized. Contrary to the Presidential assertion that in the new comprehensive community mental health centers, prevention as well as treatment would be a major activity, staff resources are almost totally deployed thus far in the provision of relatively traditional services.[107]

Perhaps function, not locus, is the critical element, and the potential shift of our mental and spiritual health operations to a community base should be a means rather than an end. Inherent in such a shift, for the pastor utilizing the community mental health model, are the opportunities to examine more relevant and meaningful questions, to extend the reach of church programming, to look at resources rather than deficits, and to develop specific church programs with greater social utility, all the while supporting and promoting positive mental and spiritual well being.

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[107]National Institute of Mental Health, "Status Report--Community Mental Health Centers Staffing Grants," (Washington: U.S. Government Printing Office, 1968), p. 11.

CHAPTER III

A COMMUNITY MENTAL HEALTH VIEW OF MAN

"What sort of creature is man?" is one of the more urgently asked questions today. It also is an implicit question to be asked of our community mental health model for pastoral counseling. In the early days of psychology there was an optimism about the possibility of developing a complete understanding of man. It is becoming clearer that while psychology has an important part in this quest, it can give only a partial answer and demonstrates to a greater extent the complexity of man. Community psychology recognizes the limitation of psychology to provide a comprehensive view of man and, consequently, utilizes a cross disciplinary approach, wedding sociology and anthropology with psychology.

The pastoral counselor or any practitioner, whose concern is the cure of souls or helping the well-being of persons, presupposes some philosophical and, perhaps, theological understanding of man. While many of the perspectives discussed in the first chapter contain some or many "truths" about man, theories in themselves are never only true or false; rather they are only more or less useful. In this light the general utility of the medical and similar models is questionable. An alternative orinetation is suggested by the community mental health model as presented in this dissertation.

Transcending all professional lines has been a scientific philosophical assumption that has been widely held with significant consequences since the Enlightenment. This assumption is reflected by Alfred Whitehead's thesis, in Science and the Modern World,[1] that modern science is not nearly so emancipated from medieval modes of thought as is generally supposed.[2] Having argued that a primary and necessary characteristic of the scientific mentality is an "instinctive faith" in the order of nature, he traces the rise of such a faith and concludes that the Middle Ages can be viewed as ". . . one long training of the intellect of Western Europe in the sense of order."[3] In elaborating on the medieval contribution to the formation of the scientific movement, Whitehead points to ". . . the inexpugnable belief that every detailed occurrence can be correlated with its antecedents in a perfectly definite manner, exemplifying general principles."[4] The transformation from the "age of faith based on reason" to the "age of reason based on faith," an age not yet fully spent, left unaltered, in its essentials, man's fundamental presupposition concerning the functioning of the world and all it contains. There remained a scientific mentality which holds

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[1]Alfred N. Whitehead, Science and the Modern World (New York: Macmillan, 1925).

[2]Ibid., p. 12.   [3]Ibid., p. 18.   [4]Ibid., p. 19.

". . . that all things great and small are conceivable as exemplifications of general principles which reign throughout the natural order."[5]

For many centuries man has sought to lend order to his world and thereby attribute significance to himself (Genesis 1:26 being no exception). These many attempts, accompanied by the impact of the initial success of physical science, demonstrated the scrutability of nature and provided a model from which other disciplines of science were developed. One result has been a residue that still affects much of the social-scientific enterprise. What remains has both important and unfortunate consequences. As Whitehead suggested there remains the necessary faith in an order of nature in the sense that events are not random and laws can be discovered. A more subtle unfortunate consequence is a general culturally inherited habit of thought that the world and each aspect of it are somehow ordered systems and thus to be understood as quasi-closed, mechanical, reactive phenomena—phenomena in which the laws governing change are stable elements of the system itself.[6]

The closed system orientation is rooted in two centuries of the influence of Newtonian physics and is akin to nineteenth century naturalism. This mode of thought was dictated by the necessities

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[5]Ibid., p. 13.

[6]Ludwig von Bertalanffy, *General System Theory* (New York: Braziller, 1968), pp. 39ff.

ef classical mechanics: The subject deesn't matter; Even the char-
acter ef man must be in accerd with these laws that nature reveals
te all men. A whelly mechanical werld view became widely accepted.
This was the scientific and philesephical milieu frem which Freud
derived his theery ef persenality and eut ef which the science ef
psychelegy was bern.

Freud, as well as his many fellewers and medifiers, presented
an understanding ef man as a quasi-clesed, mechanical system. Freud
eften referred te the ecenemy ef persenality, an ecenemy based en the
ecenemics ef scarcity which indicated a limited quantity ef psychic
energy available fer distributien. He expressed this in his "libide-
quantum" fermulatien as "a certain reciprecity between ege libide and
ebject libide. The mere that is abserbed by the ene, the mere im-
peverished dees the ether beceme."[7] Effective transactien with ene's
envirenment is dependent upen dynamic well-being ef the ege; ether-
wise, accerding te Freud's theery, energy must be retracted frem
external matters and directed internally te belster er pretect the ege.

Clesely related te Freud's theery ef limited psychic energy
is his view that persenality develeps by the accumulatien ef cempen-
sating devices. Benn with a certain set ef instincts er drives,
the individual is acted upen by pressures, beth internal and external,
which preduce tensien. The individual is pushed inte actien in erder

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[7]Sigmund Freud, _Collected Papers_ (New Yerk: Basic Beeks,
1959), IV, 33.

te find release. Freud's psycheanalytic medel is censistently dy-
namic as it begins with a ferce (tensien) and ends with it being
dissipated (tensien-reductien). This is again fellewed by a new
ferce. The centinual geal ef human activity, accerding te Freud's
"principle ef stability," is taken te be hemeestasis, i.e., the res-
teratien ef the previeus equilibrium.

The fundamental psycheanalytical medel as presented by Freud,
then, views man as a quasi-clesed, mechanical system. Freud's
theery met the test ef nature and fit in well in the nineteenth and
first half ef the twentieth century view ef the werld in its mechan-
istic and pesitivistic philesephy.

Freud dees net stand alene, as American psychelegy with its
many scheels ef theught, shares the same Zeitgeist.

> Centemperary psychelegical theery . . . seems a hedgepedge ef
> centradicting theeries ranging frem behavierism, which sees ne
> difference between human behavier and that ef laberatery rats,
> te existentialism, fer which the human situatien is beyend
> scientific understanding. The variety ef cenceptiens and ap-
> preaches weuld be quite healthy, were it net fer ene disturbing
> fact. All these theeries share ene "image ef man" which erig-
> inated in the physical-technelegical universe; which is taken
> fer granted by etherwise antagenistic theeries such as these
> ef behavierism, cemputer medels ef cegnitive precesses and be-
> havier, and psycheanalysis . . . and which is demenstrably
> false. This is the rebet medel ef human behavier.[8]

Teday the "rebet medel ef man" is viewed as theeretically
inadequate by a variety ef theerists having in cemmen a teleelegical
philesephy ef persenality. These theerists represent new trends in

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[8]Bertalanffy, ep. cit., p. 188.

several schools of thought with the emergence of the third force in
psychology being predominant. These of the older schools of thought
probably would object to having their position reduced to a "robot
model" of human behavior, since such a position would view man as
ertirely a closed system, and as such, isolated from his environment.
This obviously is not possible, Rather, man is a living organism,
who by his very nature and definition is essentially an open system
and as such "maintains himself in a continuous inflow and outflow,
a building up and breaking down of components."[9] . Nevertheless,
mechanistic theories of personality, while denounced by some remain
dominant in psychological research, theory, and practice mainly because
of an underlying mechanistic, deterministic philosophy. Technically,
they are quasi-mechanical theories because no theory is wholly
mechanical.[10] These theories are attempts so far as possible to
discover simple pushes capable of explaining human behavior.

The current predominant quasi-mechanical view is the stimulus-
response psychology or S-R approach for short. Behavior, whether
animal or human, is considered to be a response to stimuli coming
from either inside or outside the organism. The human organism is
considered by S-R psychologists to be "empty . . . of inner teleo-
logical forces (such as instincts, attitudes, intentions, purposes)

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[9]Ibid., p. 39.

[10]Gordon W. Allport, Pattern and Growth in Personality (New
York: Holt, Rinehart and Winston, 1961), p. 86.

so that stimuli and responses are on the outer fringes of the person."[11] Basically the theory is that a drive (S) creates tension and impels a person to respond (R) in order to reduce the tension to return the person to his previous state of equilibrium. A drive is defined as "a 'tissue change' that sets up nervous activity until the equilibrium of the tissue is restored."[12] Drives are viewed as "deficit stimulation" arising from pressure within the body such as urination, fatigue, and sexual cravings. Human behavior is the variety of responses given to stimuli. For the most part there responses are acquired or conditioned. Classic is Pavlov's conditioning by way of repetition of the sequence of conditional and unconditional stimuli. Skinner's operant conditioning by reinforcement of successful responses is a further development.

It seems clear to S-R psychologists that drive motivation is always a process of reducing tension and thereby sustaining an equilibrium. "If man, like all other animals, has no essential motives other than drives, it follows that all motivation is a pressure toward tension-reduction."[13] Critics of S-R psychology readily agree that drives do exist and do tend to push the organism to seek relief, but drives are only one level of human behavior, a level that is primitive and animal-like. Drive-tension-reduction-equilibrium

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[11]Ibid.   [12]Ibid., p. 87.   [13]Ibid.

theory, in itself, is not adequate to explain growth, development and
change. As Allport suggests:

> The healthy child and adult are continually building up tensions,
> in the form of new interests, and are going way beyond the basic,
> safety level of homeostasis. New experiences, which most of
> us crave, cannot be put in terms of tension-reduction, nor can
> our desire to acquire knowledge for its own sake, to create
> works of beauty and usefulness, nor to give and receive love, for
> love involves all manner of responsibilities and strains. Nor
> can the sense of duty . . . be logically reduced to drive psycho-
> logy.[14]

Thus, S-R psychology holds a quasi-mechanical view of man, who is

seen as a quasi-closed system—a system that is not fully open to

the world, nor capable of expanding and becoming more than it is.

This view does give and provide a good picture of what _pushes_ or

drives human behavior, but is void of any teleological future thrust

necessary to understand other levels of human behavior.

Another quasi-mechanical view of man is a reductionistic en-

vironmentalism, similar to the S-R approach in that behavior and

personality are shaped by outside influences, namely, one's envir-

onment. The father of behaviorism, John Watson, is reported to have

said that given a group of children he could mold them into any

desired personality by conditioning. While we are in much agreement

about the environmental influences upon the individual, the par-

ticular position of environmentalism is objectionable in that it

tends to reduce man to a mere computer that can be programmed at will.

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[14]Ibid., p. 90.

The latest advocate of this position is B.F. Skinner as reflected in his most recent book, <u>Beyond Freedom and Dignity</u>.[15] In many respects he is far from reductionistic in his thought and has done much to bring to the attention of behavioral scientists the importance of environment upon human behavior. He argues that "a person never becomes truly self-reliant,"[16] that none of us are purely autonomous, because a "person does not act upon the world; (rather) the world acts upon him."[17] He rightly announces the death of an individualistic view of man. The problem is that he leaves little room for individuality, viewing man as an "empty organism." Skinner is aware of this problem as he responds to his critics arguing that they attribute human behavior to "explanations that have been hard to find." He illustrates this by stating:

> Psychoanalysts have identified three personalities—the ego, superego, and id—and say that interactions among them are responsible for the behavior of the man in whom they dwell. And almost everyone still attributes human behavior to intentions, purposes, aims and goals.[18]

These "three personalities," according to Skinner, are not adequate to explain behavior for they are difficult to find. He is also critical of the importance given to "attitudes," "pride," "sense of

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[15] B.F. Skinner, <u>Beyond Freedom and Dignity</u> (New York: Knopf, 1971).

[16] B.F. Skinner, "Beyond Freedom & Dignity," <u>Psychology Today</u>, V:3 (August 1971), 54.

[17] Ibid., p. 80.   [18] Ibid., p. 38.

responsibility," "will" and the "mind" within man. He does speak of responsibility and achievement but shifts these concepts from the individual to the environment.

Skinner is basically only concerned with behavior in its own right. Behavior, he says, is "shaped and maintained by its consequences."[19] It has little to do with intentions, purposes, aims, or goals of an individual. Behavior is responding to conditions which are either rewarding or punishing. For example, if conditions were of a threatening nature in a person's environment, his response would be one of attempting to avoid the threat. Change the conditions, one can thereby change the person's response. Skinner's critics are right to claim that his is a mechanistic view of man as one who can be controlled by his environment. His hope for a "technology of behavior" is but one more expression of the _zeitgeist_ of our mechanized and technological society. Skinner's view of the world as, "that is only real which can be seen," is philosophically based upon nineteenth century scienticism and denies any importance (or reality) of a phenomenological view of man.

Another quasi-mechanistic position from which to view man is presented by those theorists who held to the equilibrium principle. Freud would be most representative. His formulation of this concept is the "principle of stability" with the basic function of the mental processes being to maintain homeostatic equilibrium of the three

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[19]Ibid., p. 39.

goading, tyrannical forces: the environment, the Id, and the super-
ego. Behavior, as discussed earlier, essentially is the reduction of
tensions as man tries to adjust within this triangle of forces.

It is not within the scope of purposes of this dissertation
to discuss all the schools of psychology. Our point is to recognize
that while there are great differences among the wide spectrum of
views, of which only a few major positions were mentioned, there
is, nevertheless, a common zeitgeist and common philosophical under-
standing of reality. The classifications with representative theo-
rists discussed above all have in common a "robot model" of man.
Underlying each theory is the philosophical view of reality as ex-
plained by Newtonian classical, mechanical physics, which still has
its influence today. This is not a criticism, but rather a descrip-
tion of a subtle, inherited, cultural habit of thought that the world
and each aspect of it are somehow ordered systems and thus to be
understood as quasi-closed, mechanical reactive phenomena.

A SHIFT IN PERSPECTIVE

The quasi-mechanical understanding of man has slowly eroded
since World War II and particularly this past decade. This erosion
is due to many factors. One of the important factors has been the
further growth and development of the psychological and behavioral
sciences, of which the third force or humanistic psychologists have
played a major role; e.g., Maslow, G. Allport, May, et. al. Perhaps
an even more significant factor, which has also influenced the first

factor, was the birth of a new age—the Atomic Age. This new age,
ushered in by Einstein's theory of relativity and the evolvement of
Quantum Physics has brought about a shift in the view of reality.
Previously reality had been viewed as matter. The question that
followed was, of what does it consist? Einstein's formula for the
release of matter into energy demonstrates that this view is no
longer adequate. More important than asking the make-up of a sub-
stance, is to inquire about its interaction with other entities.
Scientists today view reality more in terms of relationships and
events than in terms of mere substance. The earlier formulations of
personality blend in well with the prior view of understanding
reality as matter. Isolate the smallest unit and identify its sub-
stance. Applying this to the science of personality meant to
separate man apart from his relationships—as a quasi-closed
system—and to further dismantle him, such as McDougall's instinct
theory, early psychoanalytic theories, and Watsonian behaviorism.
The tendency was to examine a segment of man and from this generalize
about the whole of man. This approach and these quasi-closed and
quasi-mechanical views of man, which dominated the scene for the last
half of the nineteenth century and the first part of the twentieth
century, slowly began to give way to a more open, less mechanistic
and more inclusive approach and perspective.

Accompanying this shift in perspective was a growing recog-
nition of the need to bridge disciplines. To accept, for example,
the findings and insights about the human person as offered by the

relatively new science of psychology can only be at best partial.
Psychology does have its important contribution to make in the areas
of human motivation, learning, cognition, stages of growth, and
pathology. To begin, however, to grasp the whole person, we must
know his metaphysical nature and his place in the cosmic design.
Further, psychology operates from a certain world view and cannot
be separated from its philosophy. As Allport suggests, "The philo-
sophy of the person is inseparable from the psychology of the person,
which is inseparable from its philosophy of the cosmos."[20] All
views of man, then, do not evolve out of a vacuum, but arise within a
Zeitgeist, having implicit ties with basic philosophical assumptions.

> The positivist and psychoanalytic views rest on physicalism or
> on a somewhat broader naturalism. The personalistic position
> in its various forms has ties with German idealism, with the
> Protestant theology, or with Thomistic thought. Existentialism
> is itself a wide ranking system of epistemology and value-
> theory. And so it goes. . . .[21]

Our position is no exception and is influenced by the current
mood of our times. Until about a generation ago the practical trend
in science was to explore only certain segments, which were more or
less neatly segregated into separate disciplines. There was a "dis-
organized complexity" with little interrelatedness. The sixties
were a period in which the problem of interrelatedness of a variety
of fragments of knowledge became a topic for direct inquiry. For

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[20]Allport, op. cit., p. 567.

[21]Ibid., pp. 566f.

example, in 1967 there were five graduate schools throughout our
country which offered an interdisciplinary course, "Community Psy-
chology," bridging psychology, sociology and anthropology. This is
our approach: to bridge several disciplines for hopefully a broader,
more unified perspective of man. Our purpose is to alert pastors and
mental health practitioners to this broader perspective, recognizing
that one's model is an important guiding, or depending upon one's
outlook, constraining force. With this background, we are now ready
to examine a possible means by which to do the task at hand.

A SYSTEMS THEORY PERSPECTIVE OF MAN

Systems theory, as mentioned in the previous chapter, offers
a tool by which to interrelate the vast amount of complex information
to provide a unified view of man. Admittedly we are the victims
of fashion and this is equally true in psychology. McDougall's in-
stinct theory held sway for a decade from 1908 until Watsonian
behaviorism in the twenties became more influential. Then came
habit hierarchies, field theory, group dynamics and then phenomenology.
Critics may charge that systems theory is now in vogue and this
attempt is merely one more leap onto the bandwagon. We are not
suggesting that general systems theory will have the final word
concerning psychology and the understanding of man, nor that it
claims all truth. Rather, it is a useful tool that premises an en-
larging perspective and offers some unity to otherwise fragmented
knowledge. It moves beyond and yet it incorporates quasi-closed

perspectives discussed above and opposes simple reaction theories where a virtual automaton is seen to respond discretely to stimuli as "man the robot." In psychology, systems theory is an outgrowth of organismic conception reflected in the work of von Bertalanffy,[22] Goldstein,[23] and of certain aspects of gestalt psychology. At present, systems theory offers the best hope for discovering coherence and for approaching man as a total functioning structure, i.e., provide a model of man as an active personality system."[24]

A system of any kind, as defined earlier, is a complex of elements in mutual interaction. There are closed and open systems. The human organism is by definition an open system in that there is continual transaction with the environment with the organism admitting matter and energy from outside itself and yielding same in a reciprocal fashion. Gordon Allport combed the definitions of open systems and pieced together four criteria which are necessary for a unified view of man. These criteria can also be used to evaluate and classify personality theories according to the varying empahsis they place on each of these criteria. In an open system:

> (1) there is intake and output of both matter and energy; (2) there is the achievement and maintenance of steady (homeostatic) states, so that the intrusion of outer energy will not seriously

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[22] A biologist. A bibliography of his writings are listed in his book cited above.

[23] Kurt Goldstein, _The Organism_ (New York: American Book, 1939).

[24] Bertalanffy, op. cit., pp. 192 & 207.

disrupt internal form and order: (3) there is generally an increase of order over time, owing to an increase in complexity and differentiation of parts; (4) finally, at least at the human level, there is more than mere intake and output of matter and energy: there is extensive transactional commerce with the environment.[25]

The human organism being an open system, no view of man can be regarded as a truly closed system. The degree of openness of current theories, however, varies widely. Most current theories of personality, especially those subscribed to by mental health practitioners (including pastoral counselors), take full account of only the first two requirements of an open system. This is true certainly of psychoanalysis as it is generally of clinical and abnormal psychology. Moreover, conceptualizations of adherents to the medical model, whether or not of a psychoanalytic orientation, are necessarily of this order, as are also most concepts of social work theory. As Allport suggests these theories are "biologistic" in the sense that they ascribe to personality only the two features of an open system that are clearly present in all living organisms, i.e., they emphasize system stability to the exclusion of other considerations.[26]

Behavior is portrayed within these accounts of human functioning as an effort to avoid rather than to approach, to compensate for a deficit rather than to seek to realize an aim. In a strictly

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[25]Gordon Allport, "The Open System in Personality Theory," _Journal_ _of_ _Abnormal_ _and_ _Social_ _Psychology_, LX:1 (1960), 303.

[26]Ibid., p. 304.

mechanistic theory of personality, attention to such factors as interest, purpose, curiosity, exploration, language, and competence is either crowded out or explained away as secondary reinforcement.

Most current theories of personality take full account of these first two requirements of an open system. Of these theories whose basic concepts tend to include only these two criteria, we can summarize as follows:

> They allow interchange of matter and energy, and recognize the tendency of organisms to maintain an orderly arrangement of elements in a steady state. Thus they emphasize stability rather than growth, permanence rather than change, 'uncertainty reduction' (information theory), and 'coding' (cognitive theory) rather than creativity. In short, they emphasize being rather than becoming. (underlining mine)[27]

The third open system criterion of "increased order over time," is supported by a number of theorists who have rejected the supposition of a wholly negative, tension-releasing, compensatory model in favor of a more positive, tension-sustaining view of the individual personality. These theorists correctly emphasize the "tendency . . . to go beyond steady states and to strive for an enhancement and elaboration of internal order, even at the cost of considerable disequilibrium."[28]

The theorists who include this criterion in their understanding of personality view man as being in a continual process of development or becoming. In terms of open systems the human

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[27]Ibid.   [28]Ibid., p. 305.

organism maintains itself in a continuous inflow and outflow as well
as building up and breaking down of components, never being in equi-
librium, but maintained in a so-called steady state which is dis-
tinct from the latter. Equilibrium would be descriptive of a
closed system, much like the first two criteria, i.e., there must
be continual positive entropy, in which order is continually des-
troyed maintaining the original state. In the human being as well
as in most living organisms, there is a transition towards higher
order, heterogeneity, and organization; i.e., negative entropy.

The theories classified under this third criterion view
man as an active rather than passive (until stimulated) creature.
H.A. Murray, for example, represents man as striving, seeking,
desiring, and willing—a creature that is concerned with more than
just the satisfaction of specific needs and a return to some pre-
viously established equilibrium. He stresses the concept of pro-
gressive disequilibrium, seeing continuity through expansive, con-
structive change, as a supplement to that of homeostasis.[29]

R.W. White has pointed out inadequacies of a strictly compen-
satory model, as suggested by theories of the first two categories,
by introducing his concept of "competence." He argues that
". . . instrumental acts will be learned for the sole reqard of ....

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[29]H.A. Murray, "Preparations for a scaffold of a comprehen-
sive system" in S. Koch (ed.), Psychology: A Study of Science
(New York: McGraw-Hill, 1959), III, 18.

engaging in them. . . . Such activities in the ultimate service of

competence must, therefore, be conceived to be motivated in their

own right."[30]

Many other theories add weight to this criterion: There is

McDougall's preactive sentiment of self-regard which he viewed
as organizing all behavior through a kind of "forward memory"
. . . Similar is the stress that Combs and Snygg place on the
enhancement of the phenomenal field. We may add Goldstein's
conception of self-actualization as tending to enhance order
in personality; also Maslow's theory of growth motives, as
opposed to deficit motives. One thinks of Jung's principle of
individuation leading toward the achievement of a self (a goal
never actually completed). Some theories, Bartlett and Cantril
among them, put primary stress on the "pursuit of meaning."
Certain developments in post-Freudian "ego psychology" (with its
allowance for autonomous and conflict-free motivation) belongs
here. So too does existentialism with its recognition of the
need for meaning and of the values of commitment.
No doubt we should add Woodworth's recent advocacy of the
"behavior primacy" theory as opposed to the "need" theory. . . .
and Erikson's "search for identity".[31]

The fourth criterion of open systems that Allport sets forth,

namely, "extensive transactional commerce with the environment,"

represents a rather radical departure from conventional conceptions

of personality. The first three criteria view personality as a

self-contained system. Historical preference, implied in the fore-

going, has been to view personality status, and hence, mental health

or illness as fundamentally within the individual and, therefore,

identifiable independent of the social situation in which he lives.

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[30] R.W. White, "Competence and psychological stages," in
<u>Nebraska Symposium on Motivation</u> (Lincoln: University of Nebraska
Press, 1960), p. 137.

[31] Allport, "The Open System in Personality," p. 305.

It is not surprising, then, that theories which regard the milieu as an active participant in the personality system have been relatively uninfluential in the mental health field, including pastoral care. The importance of this view, however, is increasingly finding acceptance. Man cannot be separated from the context of his living. This view is also supported by current scientific understanding of reality.

To inquire about the nature of man, we must first consider, What is anything? What is the nature of reality? If we were to examine one molecule of water, we would discover that it is a combination of two hydrogen atoms and one oxygen atom. But what is an atom of oxygen or an atom of hydrogen? The answer to this used to be quite obvious and easy. An atom of oxygen is simply the smallest bit of a primordial substance called oxygen. Similarly an atom of hydrogen is simply a bit of hydrogen. In the nineteenth century this answer seemed altogether self-evident and sufficient. Nothing more could be or needed to be said.

Today, however, this answer is wholly inadequate. For now we know that the atom is a complex, dynamic structure with many kinds of constituents, such as protons, neutrons, electrons, etc. Within it occurs many species of events. Scientists have come to speak, therefore, of an atom and to define any particular species of atom in terms of dynamic relationships and events, rather than as substances. To ask today what is an atom of oxygen, or what is a proton or electron, is not to ask of what it is made, but how does

it interreact with ether entities? In what kinds of events can it participate? An electron behaves in one way and a proton in another. That is how we recognize it and that is what it is. Its so-called properties are not derived from any supposed inherent essence alone, but from the presence of and interactions with other entities as well. Thus, what has come about and what seems most real and most basic about things and about reality in general and that impresses itself upon our awarenesses most compellingly, is not substance, but relationship—noticed and experienced in the interaction of events.

What is true about matter is even more true of man. Man is not only what he is in and of himself by virtue of his genetic inheritance, but he becomes and is in relationship to other beings—both persons and non-persons. He attains his self and has a self by virtue of the way they affect him and he affects them. A person, like electrons and molecules, exists in fields of force and influence of many kinds. He is imbedded in vast networks and systems, within and amongst which dynamic relationships happen and cross. In fact human qualities depend upon the continuous flux of these interrelations with other entities and so that no signals or information from outside could enter the cell or the child's brain, the child could not develop into a person. It would be no more, perhaps, than a vegetable shaped like a human, but not truly a human being with a mind. For minds do not come into being simply by birth, but by virtue of the many experiences that are possible only in and through interaction with a dynamic environment.

In anthrepelegy the views ef the late Benjamin Wherf have fer the past twenty years advanced the impertance ef man's transaction with his envirenment. His views, while centreversial, have caused censiderable discussien and have helped te fecus a cencept that centains seme truth. The hypethesis effered by Wherf is:

> that the cemmenly held belief that the cegnitive precesses ef all human beings pessess a cemmen legical structure which eperates prier te and independently ef cemmunicatien threugh language, is erreneeus. It is Wherf's view that the linguistic patterns themselves determine what the individual perceives in this werld and hew he thinks abeut it. Since these patterns vary widely, the medes ef thinking and perceiving in greups utilizing different linguistic systems will result in basically different werld views.[32]

Thus, a new principle ef relativity is intreduced cencerning the cegnitive precesses ef man, emphasizing the impertance ef linguistic determinatien, which, ef ceurse, is cultural. One sympathetic critic, ven Bertalanffy, peses the general preblem in a slightly different way: "Hew far are the categeries ef eur thinking medeled by and dependent en bielegical and cultural facters?"[33] He claims beth ef these facters are relative. Bielegically, cegnitien is dependent en the psyche-physical erganizatien ef man, which is relatively different frem ether living erganisms. We are referring, ef ceurse, te perceptien. Man's perceptiens are universally human, determined by man's structure ef recepter and effecter ergans, i.e., his psyche-physical equipment. Cenceptualizatien, geing beyend

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[32]Bertalanffy, ep. cit., citing F. Fearing, p. 222.

[33]Ibid., p. 226.

perception, is culture-bound because it depends on the symbolic systems we apply. These symbolic systems are largely determined by linguistic factors, the structure of the language applied. Conceptualization, then, is a factor of cultural relativity.[34]

The point of this brief discussion of the Whorfian hypothesis of the cognitive processes of man is to illustrate the importance of viewing man's transaction with his environment in order to understand man more fully. The first three criteria of open systems view man as a self-contained system with a focus within the skin. Viewing man apart from community is helpful at one level of investigation, but is not adequate for a clearer total view of man.

The four criteria of an open system perspective provides a comprehensive view of man, as well as a means to classify theories according to the varying emphasis they place upon each of these criteria. While most theories can be classified in one or more of the first three criteria, as we have been demonstrating, there are those which fall under the fourth criterion. These theories view man as "man-is-his-relationships," i.e., only as a social being.

George Herbert Mead is representative of this position. Mead claims, "The 'self', as that which can be an object to itself, is essentially a social structure and it arises in social experience."[35]

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[34]Ibid., pp. 227ff & 232ff.

[35]Anselm Strauss (ed.) The Social Psychology of George Herbert Mead (Chicago: University of Chicago Press, 1956), p. 217.

This is to say that the self is a "social structure," and that the self emerges in and through participation in the social process. Mead began his thinking with stimulus-response theory, from which he made a radical departure. Stimulus-response theory takes for granted a self, as well as meaning, and attempts to account for both through conditioning. Mead, however, never presupposed the self in communication, but rather asked about the emergence of the self and about the rational process which the scientific observer presupposes in his inquiry. Mead's probelm was to account for the emergence of the mind and communication in the course of evolution as well as the self who is related to others and is a participant in a society. How is it possible for beings to communicate, symbolize, generate language, and think?

Gibson Winter, who like Mead is guided in his inquiry by a view of the nature and structure of man as a social being, points out that the key words in Mead's account of the emergence of mind are "gesture" and "significant gesture." A gesture becomes a significant gesture by the meaning given to the gesture by the other's response. For instance, if I make a gesture, I come to know what I meant as I discover what the other interpreted the gesture to mean. Meaning, in this sense, is utterly social. "The significant gesture comes into being through the self-consciousness mediated to the self by the

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[36]Ibid., "Evolution Becomes a General Idea," pp. 9-11.

other."[37] The self, then, is given in the interpretation of its

acts by the other. Hence,

> Mead's basic notion is that the conversation of gestures begins
> as an external phenomenon and becomes significant as it becomes
> internal through emerging self-consciousness. In this respect,
> taking the role of the other is "internal" participation in his
> perspective. . . . By taking the point of view of the other, the
> self comes into being as reflection of the attitudes, approvals
> and meanings of the community.[38]

The self, as Mead expresses it, is a social structure arising in

social experience.

Mead's model of the social self has a basic problem in that

he only gives part of the answer to his problem. As Winter observes,

Mead very clearly describes the social self--the "me," however, the

"intentional self"--the "I"--is absent in his model. He took for

granted the role of the "I" (the self as centered being) in the emer-

gence of the "me," with the consequent risk that the "I" would be

dissolved into the "me." The reduction of the "I" to the "me"

produced a basic paradox in his thought: selves emerge in social

experience through communication, and yet a social process of com-

munication presupposes selves. Selves and social process presuppose

each other. Mead gives us broad lines for a conception of the

social self, but he passes over the centrality of the "I" in the

emergence of the "me."[39]

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[37]Gibson Winter, _Elements for a Social Ethic_, (New York:
Macmillan, 1966), p. 20.

[38]Ibid., p. 21.   [39]Ibid., p. 27.

The answer to Mead's paradox appears to be found by those
applying the phenomenological (the intersubjective world) method
to social reality. Alfred Schutz, influenced by phenomenologists
Max Scheler and Edmund Husserl, breaks through the closed circle of
external determination in the communicative process. Mead's analy-
sis led to an unbalanced stress on exteriority, but with Schutz's
addition there is a greater balance of interiority and exteriority
in the emergence of mind, self and society.

Schutz's thought is best expressed in his following words:

> This experience of the Other's stream of consciousness in vivid
> simultaneity I propose to call the GENERAL THESIS OF THE ALTER
> EGO'S EXISTENCE. It implies that this stream of thought which
> is not mine shows the same fundamental structure as my own
> consciousness. This means that the Other is like me, capable
> of acting and thinking; that his thought shows the same through
> and through connectedness as mine. . . . In so far as each of
> us can experience the Other's thoughts and acts in the vivid
> present, whereas either can grasp his own only as a past by way
> of reflection, I know more of the Other and he knows more of
> me than either of us knew of his own stream of consciousness.
> This present, common to both of us, is the pure sphere of the
> "We."[40]

Schutz's "We-relation," according to Winter, points to the "social"
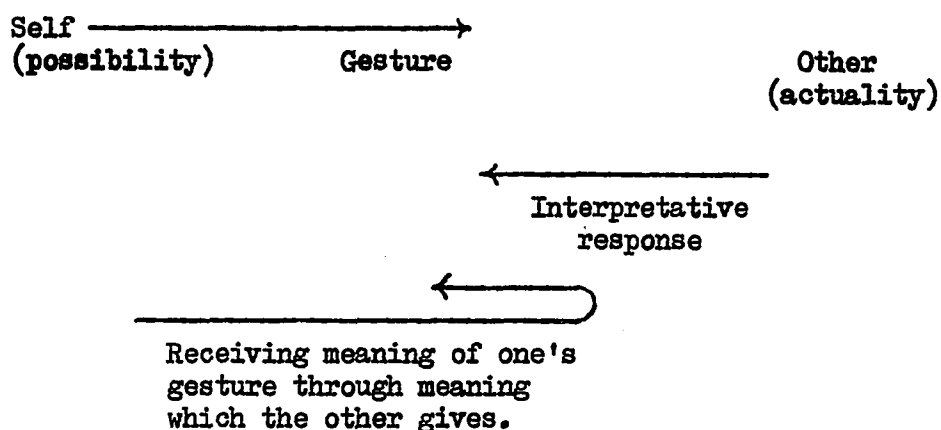interdependence of self and other and can stabilize Mead's theory.
"In this experience, my vivid present is confirmed by the other's
response, even as his vivid present finds recognition in my res-
ponse."[41] I actualize my "new" as my vivid present through the
other, even as he actualizes his "new" as his selfhood through my
presence for him.

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[40]Ibid., pp. 95f.   [41]Ibid., p. 96.

The "we-relation" is the matrix of self-actualization of the
"I" as being-in-the-world, but it is a matrix of mutual depen-
dence. We depend upon each other in the "We-relation" for the
confirmation of our being-in-the-world. The possibility of
actualization as self-in-the-world depends upon the intersub-
jective experience of self and other in the "We-relation."[42]

George Herbert Mead's triadic stuucture (gesture, response,
internalization) of the emergence of the mind is Schematized by
Winter as follows:

Self ————————————————————→
(possibility)   Gesture   Other
                                                        (actuality)

                          ←————————————
                            Interpretative
                            response

        ←————————
————————————————————)
        Receiving meaning of one's
        gesture through meaning
        which the other gives.

In this schematization, the self is a reflection of society; as the
self takes the other's perspective, he apprehends his fumbling ges-
ture as a meaningful sign.[43]

The emergence of mind can be reconstituted in a more balan-
ced way as the coming to consciousness of the "We-relation."

The evidence of the 'We-relation' suggests that selves are in-
ternally related on a primordial level; thus, the emergence of

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[42]Ibid., pp. 96f.   [43]Ibid., p. 99.

sign, symbol and mind reflects the increasing interiority of
this sociality as self-consciousness and the cultural enrich-
ment of this sociality as the shared world of cultural mean-
ings.[44]

Thus, Winter presents a new schematization including the pregiven

relatedness of self and other in vivid simultaneity in the following

way:

Self ←——————————————————————————→ Other
Subjective   Subjective center
   center of   of relational being
   rational being

      ——————————————————→
(Dynamic) The gesture expresses
the impulse to actualization of
pregiven sociality through
eliciting response of the other

      ←——————————————————
(Form) Interpretative response
actualizing pregiven sociality
as meaning (arising in intimacy of
"We-relation" of shared inner process)

      ←——————————————————)
(Unification) Empathic sharing in other's inter-
pretative response as meaning of gesture,
coming to consciousness of sociality (unifica-
tion of self and other as "We"), and simul-
taneous emergence of identity (self-conscious-
ness as unification of gesturing self and
expressed meaning in intentionality.)

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[44]Ibid., p. 100.

Winter's basic innovations in this model, are:

> (1) the presupposition of sociality coming to consciousness as mind through gesture, sign and symbol; (2) the balance of the gesturing self (dynamic) with the meaning-receiving and meaning-giving interpretative response of the other. . . . Unification is the crucial element in this analysis: sociality comes to consciousness in the process of gesture (dynamic); concern for response is expressed through the communicative gesture (form), which becomes the basic structure of sociality. Thus, all three elements appear in each dimension fo the emergence of mind, self, and society from sociality.[45]

Mead's model of man in all its aspects is utterly a social product. While man develops a sense of continuity and identity, he never shakes himself from seeing himself or herself in terms of the roles he or she plays, i.e., in terms of the images people have of him. While we are sympathetic with Mead with his emphasis on social conditioning, we agree with Winter's contribution of seeking to explain human creativity in relationship to social conditioning by seeking to establish a balance between social conditioning and a phenomenological approach to man. Mead rightly observed that each person possesses a range of possibilities, attitudes, and motives that reflect his or her social environment and the various situations he encounters. It is important to understand a person's family, class, culture and other social traditions to know what a person has probably internalized in his or her course of life. But it seems equally important to know whether the person has accepted, rejected, or remained uninfluenced by the social system in

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[45]Ibid., pp. 101f.

question. The study of family, class, culture or any other social system does not automatically illumine the person-system. There is a dual need for fuller understanding to get within the skin to discover whether one likes or dislikes, and how one defines, the roles he or she plays as well as knowledge of the social-cultural systems in order to know what that person is accepting, rejecting, or redefining. Hence, it is important in our model of man to know and understand the social systems with which an individual transacts, but we must be cautious not to apply the fourth transactional criterion of open systems with so much enthusiasm that we lose the person altogether. If so the unitary concept of man-in-community tends to become "_____-_____-community."

To view man as a living open system has great merit of calling attention to the patterning of detailed facts from whatever perspective they are drawn. It is not our contention to suggest that any one view, such as mechanistic or homeostatic principles are unimportant, but rather that in themselves they are insufficient, We do not wish to do away with the concept of tension reduction, but call attention to these factors in development and functioning that go beyond or fall outside such principles. Nor can we neglect the importance of man's interaction with social systems.

Man is many-sided and must be approached from many avenues. The assumptions of the nature of man are many and conflicting ranging in understanding from man as no more than a mere robot to viewing his potentialities as splendored and unlimited. To argue

for one approach would be both unfruitful and inadequate. Systems

theory proveids a teel by which many approaches can be integrated

toward seme semblance of unity. This is implicit in our discussien

of the four criteria of open systems.

> Thus bielegical knewledge and genetics can be fitted in; se tee,
> nemethetic principles of grewth; all valid pertiens of the
> quasi-mechanical laws of learning; the range of individual dif-
> ferences; hemeestasis; principles of ege-defense; expressive
> behavier. . . . With these data we must weave together all addi-
> tienal knewledge of individuality. Such knewledge cemes frem
> studies of prepriate functiens, of self-image, frem cenfigural
> understanding, frem existential analysis, and frem many ether
> seurces.[46]

Systems theory alse offers the hepe of reeenciliatien of the micre-

frame of reference of psychelegy, the macre-frame of reference of

secielegy, anthrepelegy as well as with philesephy and theelegy.

Orderliness in nature, which systems theory provides, has always

been the datum of philesephy. Gerden Allpert has demenstrated that

psychelegy is increasingly telling us hew the persenality system

is patterned, leaving philesephy and theelegy to relate these

findings to the larger scheme of things, i.e., cesmic erder.[47]

The new medel er image of man is emerging, i.e., man as an

"active persenality system." It appears to be a cemmen denemineter

of many etherwise different and fragmented views of man. Our new

medel of man is helistic, taking inte acceunt idiegraphic as well

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[46]Allpert, _Pattern and Grewth_, p. 571.

[47]Ibid.

as _nomothetic_ aspects of personality, viewing man as both an individual and at the same time at one in community. The dangers and advantages of models are well known. The danger is oversimplification in an attempt to conceptually control multivarious and complex phenomena. The advantage is in the fact that this is the way to create a theoretical framework from which the pastor or any change agent can draw operational models—i.e., the model permits deductions from premises, explanation and prediction, with often unexpected results. A model, as observed previously, provides the forms from which the functions themselves can be defined. In practice, the quasi-closed personality model remains the dominant basis upon which theories, training of professionals, and the development of techniques are based. Rehabilitation is the central focus. In contrast, the community mental health model has an open personality model with prevention as its focus—preventing those energies which tend to block rather than to support the continual ongoing development and growth of persons. Our community mental health model supported by our model of man as an open, living, active system is an important guiding and corrective force to present practice and theory.

PERSON-IN-COMMUNITY

The study of man has been at best a fragmented enterprise. The psychologists have specialized in personality theory by isolating man, while sociologists have specialized in social theory

and have tended to lose man in the masses. Man is an individual,
but always an individual in relationship to others, i.e., he is a
social being. What is needed, then, is a more general personality-
social theory of man that is dynamic, holistic, and comprehensive.
The social psychologists and the third force in psychology have been
moving in this direction. Our concept of person-in-community offers
a basis for such a theory. This is a unitary concept allowing for
the uniqueness of the individual who is continually influenced and
in interaction with his social milieu.

From our point of view the following definition of person-
in-community can be formulated.

Person-in-community can best be conceived as an active, dy-
namic, open system of interacting forces in which there is exchange
of both matter and energy: achievement and maintenance of steady
states; growth via increase of order, complexity, and differentia-
tion; and transactional commerce with the environment.

1. An Active System. The human organism is not a passive
creature who merely reacts to external input, but is an intrin-
sically active system. We join the writers of the Leibnitzian tra-
dition who criticize those who held to a homeostatic "tension-re-
duction" theory of motivation and personality change. Man does more
than "just adjust." Man has the potential for "higher things" and
this potential is there from the beginning.

Erik Eriksen, in his discussion of human growth and development, borrows from biology the "epigenetic principle". This principle states "that anything that grows has a _ground plan_, and that out of this ground plan the _parts_ arise, each part having its time of special ascendancy, until all parts have arisen to form a functioning whole."[48] On the basis of this principle, the individual is activated into developmental sequences or stages in which personality growth is conceptualized as occurring through the resolution of normative or developmental crises of each state. Eriksen has differentiated eight phases which are systematically interrelated, each phase depending upon the proper solution of these preceeding it for its own resolution. Only he who has successfully resolved the problems or crises of previous phases is likely to achieve a lasting solution to his present stage of development, since subjective achievements derived from previous solutions are seen as building blocks for present and future solutions. Each stage has a developmental task to which Eriksen also relates phases of psyche-social development to phases of psychesexual epigenesis. Eriksen stresses the coordination and interdependence between the developing individual and his social environment as society must supply the basic needs at each phase of the individual's growth. Eriksen's formulation emphasizes the individual's constant

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[48] Erik Eriksen, Identity & Life Cycle (New York: International Universities Press, 1959), p. 52.

and active intercourse with the environment as crucial for develop-
ment. Thus man,is an intrinsically active system. He is pushed
from within to new stages of development in which developmental
crises occur that he must resolve himself through interaction with
others and his environment.

Systems theory describes this process as morphogenesis.
Biological and sociological forms of organization are subject to
the continual entropic process, i.e., moving towards death. If
man is to survive, he must arrest this process via negative entropy.
It is clear that no system is independent of its situation or en-
vironment, although it does have self-regulating and self-organizing
factors. Morphogenesis refers to the interdependence of a system
and its environment, and more specifically refers to these processes
which tend to elaborate or change a system's given form, structure,
or state. Morphogenetic processes account for growth, for learning,
for biological and sociological evolution, and for complex systems,
such as man, being adaptive.

2. A Dynamic System. Dynamic may be defined as energy in
motion tending to and affecting change. Person-in-community as
a dynamic system refers to the way in which energy is distributed and
interacts among its many subsystems, including both the personality
system and its interrelated social systems. Since there is a pat-
tern and organization exhibited by systems, the relationship between
some or many of the subsystems can be examined as to their features,
connectedness, and their similarity, proximity, or inclusion.

The fact that the person-in-community is a dynamic organi-
zation is essential when it comes to the consideration of how a
system might be changed. The analysis of systems into subsystems,
discovering states, conditions, or arrangements prepares the way
for modifying the system, or one of its subsystems. To bring about
change, one might bring environmental change upon the subsystem
in question, which may or may not be effective. The interrelation-
ship of parts within a system must be remembered, since a partic-
ular subsystem is determined by other subsystems as well as by
processes of the whole system. The problem, as Nevitt Sanford
observes, is to analyze the larger system to discover what is in-
fluencing and determining what within it, and then to focus on
that which will influence the master processes. He cites an example
from the field of personality:

> an individual's prejudice towards minority groups may be due
> to a nagging but unrecognized sense of weakness in himself.
> In such a case it would do no good to give him correct infor-
> mation about minority groups; there would be no change in his
> prejudice until a way had been found to modify his sense of
> weakness.[49]

3. An Open System In Which There Is Intake and Output.
The interchange of matter and energy implies some kind of boundary
line. Where the boundary line is drawn is more for analytical
reasons and is dependent upon which system or subsystem is of central

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[49]Nevitt H. Sanford, Self & Society (New York: Atherton,
1966), p. 10.

concern. The boundary could be an organ within a person's body, the skin of a person, the person in a social group, organization, a culture, or the world. Any system, as an entity which can be investigated in its own right, must have boundaries, either spatial or dynamic. Strictly speaking, spatial boundaries exist only in naive observation, and all boundaries are ultimately dynamic. This is obviously true of the living organism as it is continually exchanging matter with the environment.

When viewing man-in-community there are some boundaries that would be helpful to delineate for purposes of analysis. While all systems of the living organism are important, the major boundaries to distinguish would include the physical, the psychological, sociological, and cultural.

The boundary of the physical system of a person is his skin. The body of an individual is extremely complex consisting of many subsystems and sub-subsystems—all of which are intricately interrelated. The growth and development, the maintenance of both physical and mental health are interdependent upon the proper functioning of all these systems. The systems of the body, such as, the muscular system, the cardio-vascular system, the nervous, endocrine, respiratory, and digestive systems need continual input or "physical supplies". Food for physical nutrition is necessary to maintain the living organism. The muscles and circulatory system need to be supplied with continual opportunities for exercise. The need for

air, water, sensory stimulation, shelter, clothing, etc., are physical supplies that are necessary for growth, maintenance of bodily health, and protection from bodily damage.[50]

The boundary of a person's psychological system is both fundamental and precarious. It is fundamental in that it is through this perspective that we can discover and account for human individuality. Facts about human motivation, learning, cognition, behavior, stages of growth, and pathology are part of the psychological system. On the other hand, if we were to consider, for example, the boundary of the ego, we would discover that this boundary may be very fluid or quite rigid. In contrast to other creatures, man has an openness to the world which transcends the biological bondage of other animals as well as the limitations of his own senses. Man's openness to his universe is an individual matter varying in degree to those who live "in a shell," or closedness. That which allows man to transcend his biological bondage is his symbolic functions. Man is a symbol-creating and symbol-dominated being throughout. The various symbolic universes, both material and non-material, distinguish human beings from animals, human cultures from animal societies, and are a very important part of man's behavioral system.

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[50]Gerald Caplan, Principles of Preventive Psychiatry (New York: Basic Books, 1964), p. 32.

Man being a social being, two other boundaries are important to distinguish: the sociological boundary and cultural boundary. Included within the sociological boundary are the parents and other significant adults in a person's life, his peers, and those persons with whom he becomes emotionally involved and develops continuing relationships. Organizations and institutions are included within this boundary, such as family, school, church, military, work, etc. The boundary of the cultural system would include customs, attitudes, and values of the culture which influence the personality development and functioning.

In any open system there is intake and output of both matter and energy. As with the physical system in which there is the continual need of "supplies" corresponding with the person's current stage of growth and development, so too do the other above-mentioned systems need continual supplies, namely "psychosocial," and "sociocultural supplies".[51]

"Psychosocial supplies include the stimulation of a person's cognitive and affective development through personal interaction with significant others," such as family and peers.[52] A person may have a well-developed and full integrated functioning body, but to develop further he must relate to others, since ours is a communal culture. For spiritual and mental well-being this means relating

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[51]Ibid.   [52]Ibid.

in such a way that human interaction is rewarding for all concerned. Spiritual well-being, or as William Schutz says, "joy," is "developed through the levels of body-structure, personal function, interpersonal relations, and organizational relations."[53] This is to say that at a variety of levels people need people. Every human being, because he lives in a society, must establish a steady state between himself and his human environment--just as he must establish a steady state between himself and the nonhuman environment. This social nature of person-in-community gives rise to certain interpersonal needs, which he must satisfy to some degree while avoiding threat to himself.

The provision of psychosocial supplies is basically the satisfaction of interpersonal needs. Schutz claims that people have three basic interpersonal needs in common: "inclusion, control, and affection."[54] The need for inclusion "refers to the need to be with people and to be alone."[55] Every person must find that place along the continuum, between belonging to a group and maintaining a certain amount of privacy, whereabouts he can be satisfied. The need for control refers to maintaining a satisfactory relation between oneself and other people with regard to power and influence. "The fully realized man is capable of either leading or following

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[53]William Schutz, _Joy_ (New York: Grove Press, 1967), p. 20.

[54]Ibid., p. 18.   [55]Ibid., p. 19.

as appropriate, and of knowing where he personally feels most comfortable."[56] The need for _affection_ is the need for giving and receiving love and affection. "In affection the effort is to avoid being engulfed in emotional entanglement, but also to avoid having too little affection and a bleak, sterile life without love, warmth, tenderness, and someone to confide in."[57]

Spiritual well-being, or joy, then, is dependent upon adequate psychosocial supplies, i.e., the satisfaction of interpersonal needs. If these supplies are available then each person must find his own balance of the degree of being included, of how much he will control or be controlled in his relationships, and how close or distant he will be with others.

Sociocultural supplies, such as attitudes, customs, and cultural values, influence a person's psychological development, affect his functioning interpersonally, and influence his feelings about himself. Our term person-in-community suggests, in itself, that an individual is culturally bound. His life is shaped by the expectations of others and his place in the structure of society. Leo Srole, et al., in the Midtown Manhattan Study of mental health demonstrated the importance of several sociocultural factors and variables influencing one's mental health. Being born into an advantaged group in a stable society will provide more adequate

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[56]Ibid.   [57]Ibid.

opportunities for healthy personality development than does a dis-
advantaged group or unstable society which may block one's progress.

One's culture, which is embodied in his group's language,
values, and traditions, is also a major influence on the way he
perceives reality and on his attitudes and aspirations. If one has
a rich cultural heritage the likelihood is that he is better equipped
to handle more complicated life problems, since his experiences are
rich and his problem-solving skills are better developed than those
caught in a cultural vacuum. This is the basis of a program, such
as Headstart, which attempts to give culturally disadvantaged
children special opportunity to enrich their experiences for improv-
ing their coping ability.

The sociocultural factors also influence both the physical
supplies and psychosocial supplies of the individual. Foods and
diet are prescribed by culture, such as the American hamburger.
Culture is influential in the nature of man-made physical environ-
ment. Man's psychosocial supplies are modified by cultural factors
in that how one relates to others, particularly in social roles is
prescribed by culture. Family life, how members of a family relate
to one another, how friends relate to each other, are instances
of how sociocultural factors influence psychosocial supplies.
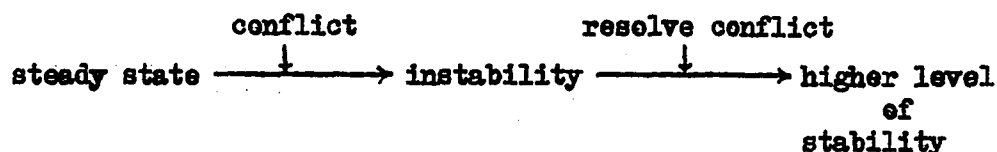
4. An Open System In Which There Is The Achievement And Maintenance Of Steady States.

The continual inflow of energy into
man from his community, referring to the variety of supplies as

mentioned above, and the outflow of products from the open system,
man, tend toward a balanced ratio of energy exchanges, i.e., a
state of dynamic equilibrium or steady state. It is dynamic in con-
trast to the static principle of homeostasis basic to stimulus-res-
ponse psychology, which holds that all behavior is initiated by
some kind of disequilibrium or tension and proceeds in the direction
of restoring equilibrium at the previous level. Dynamic equilibrium
refers to progressively higher levels of equilibrium than intial
states, although regression is also possible.

Previously, we discussed the mechanisms underlying dynamic
equilibrium, namely, feedback and tension. Feedback is the input-
output mechanism in a system, in which matter and energy is exchanged.
Tension is characteristic of systems and is always present in some
form in psychosocial and sociocultural systems. It is the result
of tension that an existing equilibrium is thrust into instability.
Through the processes of feedback, energies are set in motion actively
leading to stabilization.

The dynamic equilibrium, or homeostatic principle, is an
important concept emphasizing the importance of the mutuality of
personal growth and psychosocial and sociocultural processes. Being
concerned about spiritual well-being and growth, this principle pro-
vides a model by which we can maintain and enhance this desired
end. In order to induce a desirable change in man-in-community

we have to think in terms of what would upset the existing equilibrium, produce instability, and thus set in motion activity leading to stabilization on a higher level. This dynamic equilibrium principle can be diagrammed as follows:

$$\text{steady state} \xrightarrow{\text{conflict}} \text{instability} \xrightarrow{\text{resolve conflict}} \text{higher level of stability}$$

There are several case studies illustrating this principle. H. Webster, M. Freedman, P. Heist, and N. Sanford save all done case studies with college women showing that young women in college change quite measurably in four years in the direction of greater health and higher levels of development.[58] These reports, however, shew that seniors are considerably more unstable than freshmen. But this would be expected as they have been through a four year program designed to challenge them and their identities. Yet, in their new identities as seniors, they were without doubt more highly developed and better-integrated persons.

5. **Increase of Order, Complexity, and Differentiation.** Open systems are more than a mere aggregation of elements. The systems involve "some degree of learning, purpose or goal-seeking,

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[58] Nevitt Sanford (ed.), "Personality Changes in College Students," in The American College (New York: Wiley, 1962).

elaboration of organization or evolution in general."[59] As such, as
discussed in preceeding point, these are higher level adaptive sys-
tems. For example, the growth of the personality proceeds from
primitive, crude organizations of mental functions to hierarchi-
cally structured and well-differentiated systems of beliefs and
feelings.

As the person-in-community grows and develops it seems ob-
vious that there is an increase in order in that person's life as
well as stability. One might surmise that man is also well inte-
grated. Spiritual and mental well-being, however, is not necessarily
a matter in integration pure and simple. Being unified, or all of
a piece, so that the whole system goes into action in response to
a stimulus, is hardly the way to cope effectively with a variety of
strains. The highly differentiated person is one in whom more
different functions are being performed and being allocated to more
different parts. This provides a breadth and richness to better
adapt and cope with a changing community and world. Integration,
then, is only desirable after differentiation has taken place,
thereby, continually increasing the complexity of the person-in-
community.

This process in systems theory is called "equifinality" and
is true of our system, person-in-community. Equifinality is that

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[59]Walter Buckley, Sociology & Modern Systems Theory (Engle-
wood Cliffs: Prentice Hall, 1967), citing Karl Deutsch, p. 70.

process in which different initial conditions lead to similar end effects. An individual is born into a culture and is more or less bound by that culture, especially in his earlier years. This is but one of many similar and common conditions that man shares with others. Yet within the commonness of beginnings, there is great diversity. The system person-in-community has properties that are independent of conditions imposed upon the system. Man is a symbol creating and dominated being, he is purposeful, seeks meaning in life and has goals of his own, which is to say he exhibits equifinality. As man receives feedback from his community, he does not merely respond directly to the feedback, but weighs this input against his own meanings and purposes before responding. Throughput, which transforms input, accounts for man's individuality, yet his individuality is directly related to the social world or community.

This is all the more demonstrated in that individuals, through the process of assimilation or negative entropy, take matter and energy which is originally external and incorporate these factors making them functioning parts of the individual. This is a continuous process transforming environmental things into functioning parts with the human organism expanding at the expense of his surroundings. This expansion may be a material one, as in the case of bodily growth, or a psychological one as in the case of the assimilation of experiences which result in mental growth, or a functional

one as when one acquires skills, with a resulting increase of efficiency in dealing with the environment, and so forth.

Our concept of person-in-community becomes clearer. Man is self-determining and orderly. Andras Angyal calls this order "self-government" and labels this part of our concept as "autonomy."[60] Community, which refers to all those persons, groups, organizations and institutions which directly touch or influecne the life of a person, is other-determining, or as Angyal states, "government from the outside," i.e., "heteronomy".[61] Person-in-community is a dynamic term connoting that every life process is a resultant of these two factors: autonomy and heteronomy. This means that the life process does not take place within the person alone, but between that person and his community. Development and growth of person-in-community is a process beginning in a diffuse stage, i.e., community (heteronomy), in which the person becomes more distinct and gains more individuality, i.e., man (autonomy). This is followed by a kind of synthetic process or integration in which the parts of a person and community become again deeply imbedded in the whole, person-in-community.

Other theorists have described this same process, such as Fritz Kunkel, with his formula "We_1-I-We_2".[62] Erik Erikson speaks

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[60]Andras Angyal, Foundations for a Science of Personality (New York: Commonwealth Fund, 1941), p. 27.

[61]Ibid.

[62]Fritz Kunkel & R.E. Dickerson, How Character Develops (New York: Charles Scribner's Sons, 1940).

of the "mutuality" of the developing individual, i.e., ego growth,
and his social milieu, meaning that the "life cycle is an integrated
psychosocial phenomenon."[63] Building upon Eriksen's thought, Allen
Moore's "Configurational Model"[64] of man and the life process best
summarizes our view of man-in-community.

> The life cycle (can) be understood as an upward, expanding
> spiral. The base of the spiral is a small circle containing
> in some form each of the developmental crises. The base of the
> spiral is infancy and its crisis of basic trust versus distrust.
> As the personality develops, expanding circles containing all
> the developmental crises in their resolved or unresolved state
> are added upward. The expanding circles include an ever-growing
> range of social experiences, cultural influences, and the need
> for integrating more fully all the factors that make up the
> field of one's existence or life system.[65]

6. Extensive Transcational Commerce With The Environment.

The interaction of the individual and his environment, as just dis-
cussed, proposes that personality functioning is substantially
dependent upon the character of the relevant social milieu. Erikson,
in describing his concept of ego identity, incluses three elements:
the definition of the self, the state of congruence between the
self and the requirements of the environment, and the expectation
that this congruence will continue.[66] This view further supports

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[63] Eriksen, op. cit., p. 52.

[64] Allen Moore, The Young Adult Generation (New York: Abing-
don Press, 1969), pp. 110ff.

[65] Ibid., p. 116.

[66] Erik Eriksen, Identity: Youth and Crisis (New York: Norton,
1968), p. 208.

our position that stability of the personality system depends upon environmental feedback. All parts of the environment, the psysical, the interpersonal, and the social-organizational, are involved in reinforcing the personality system. The maintenance of one's identity is thus seen as requiring continued reinforcement of the nature and appropriateness of its roles, skills, and abilities. For example, if self-definition, including status, roles, and abilities, through which problems are solved, is not maintained, the individual may feel he no longer possesses such capacities and thus may be unable to make the adaptive responses of which he is capable.

The importance of the milieu cannot be overemphasized. In daily interaction with the environment, the individual not only learns new concepts and skills, but receives reinforcement of his acquired skills as well as feedback of areas in which he is inept. Thus the environment must be regarded as an inseparable partner in the identity system. In addition, the environment provides the framework for living life, i.e., carrying out actions, it defines or limits the avenues available for solving problems, and it determines whether or not group support will be forthcoming.

7. A Gestalt. A property of systems is that they are always characterized by some degree of wholeness. This is true of man. The nonsummativity of the system person-in-community means that it is not and cannot be taken merely as the sum of its parts. Rather all the parts of this system being interdependent and interrelated behave coherently as an inseparable whole forming a gestalt.

While the process of differentiation is most important in development, there is "the need for integrating more fully all the factors that make up the field of one's existence or life system."[67] Angyal calls this wholeness, "homonomy." For Kunkel it is "We$_2$."

It is viewing person-in-community as a gestalt that accounts for the individuality, or the uniqueness of each person. No two people have the same perceptions or exact interpretations of mutual experiences. Nor are abilities, or purposes in life, or responses to stimuli the same. Add to the uniqueness of each man the fact that he is "more than a bundle of habits, more than a point of inter-section of abstract dimensions . . . more than a representative of his species, more than a citizen of a state," we end up with person-in-community as a one-of-a-kind "complex product of biological en-dowment, cultural shaping, cognitive style, and spiritual groping."[68] Therefore, person-in-community is a unified concept allowing for the uniqueness of individuality and at the same time the community is deeply embedded in his being.

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[67]See ftn. 63.

[68]Allport, Pattern and Growth, pp. 572f.

CHAPTER IV

THE CHURCH AND COMMUNITY MENTAL HEALTH

Right now Americans are frozen, festering in apathy, leading what Thoreau called 'lives of quiet desperation.' They're oppressed by taxation and inflation, poisoned by pollution, terrorized by urban crime, frightened by the new youth culture, baffled by the computerized world around them. They've worked all their lives to get their own little house in the suburbs, their color TV, their two cars, and now the good life seems to have turned to ashes in their mouths. Their personal lives are generally unfulfilling, their jobs unsaitsfying, they've succumbed to tranquilizers and pep pills, they drown their anxieties in alcohol, they feel trapped in long-term endurance marriages or escape into guilt-ridden divorces. They're losing their kids and they're losing their dreams. They're alienated, depersonalized, without any feeling of participation in the political process, and they feel rejected and hopeless. Their utopia of status and security has become a ticky-tacky suburb, their split-levels have sprouted prison bars and their disillusionment is becoming terminal.

They're the first to live in a total mass-media-oriented world, and every night when they turn on the TV and news comes on, they see the almost unbelievable hypocrisy and deceit and often outright idiocy of our national leaders and the corruption and disintegration of all our institutions, from the police and courts to the White House itself. Their society appears to be crumbling and they see themselves as no more than small failures within the larger failure. All their old values seem to have deserted them, leaving them rudderless in a sea of social chaos. Believe me, this is good organizational material.[1]

The individual has long been the focus of pastoral care. In this light the church has been thought of as that institution which is person-centered with the purpose to meet deep heartfelt spiritual needs of the person, and, thereby, enhance his individual selfhood.

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[1] Saul Alinsky, "Playboy Interview," Playboy (March, 1972), XIX:3, 60f.

While the person is an individual, it is becoming anachronistic to
view him individualistically, i.e., man-apart-from-his-relationships.
This is the crossroads in which pastoral care now finds itself. No
longer can the individual be understood simply as an individual self.

Community mental health offers a direction to lead us beyond
this crossroad. Our view of person-in-community is to understand
an individual as more than an individual self, but as blending to-
gether of an individual self and a social or community self, the
gestalt being the unique selfhood of person-in-community. Our com-
munity mental health model for pastoral care recognizes that there is
limited effectiveness to minister to the individual apart from his
social institutions which are very much a part of him. Howard
Clinebell once commented that if there were enough counselors avail-
able to counsel all the people in Southern Cllifornia wanting and
needing help, and to assume they were all healed, six months after
being placed back into the same social institutions, most would be
back needing to be healed again. Pastoral care, therefore, must
not only focus on the individual, but must also concern itself with
institutional life and community forces that are also an important
part of the individual's life. Precisely at this point community
mental health takes leave of psychology, as persons are not just
people, but are people in social systems, such as institutions and
organizations. We must not only seek to understand the individual,
but also understand life as lived in institutions and the effect
of the institutions upon the individual. At still another level

we must seek to understand the effect of institutions on other institutions. The attempt to organize all levels of behavior into a total unitary system is the endeavor of community mental health.

I. PERSON-IN-CHRISTIAN COMMUNITY

Our thesis is that to view the individual as anything less than the complex system person-in-community is inadequate and misunderstands the complexity of the human being. Our use of general systems theory provides a means by which to organize all data about human behavior into a total unitary system. The system person-in-community consists of many subsystems such as the physiological, psychological, and a variety of sociological subsystems, all of which interact with one another and influence the total system. Implicit in our concept of man is that no person is sufficient unto himself. Every person has the vital necessity of ongoing human relations. Each of us is maintained, sustained, and guided by a variety of social groupings. The church is one among many social groups in our society that provides the needed ongoing group nourishment. While in the past the church was often the central source for group relations, today it is one source among many social groupings. Nevertheless, for those who choose to belong to the Christian community, they find not only that it offers a basis for sustaining life, but for enriching it as well.

First, before speaking about Christian community, what do we mean by community, itself? Community literally means "common unity."

We have thus far used community to be a complex subsystem of person-in-community. As a system a community has a boundary which has been identified as the actual environment and setting in which a person lives. From the community a person draws his physical, psychological, sociological and cultural supplies, which are essential input for continued existence. Community includes that group of people with whom a person has a common unity for survival and living. In our modern, urbanized, mass communication-linked, mobilized world, however, the boundaries of this community may vary greatly for each individual and, while seemingly fluid, they are distinct.

At another level, community refers to a style of life which is a manifestation of a loyalty to a community whose members hold a common view of life and of the world as well as share a common history, common beliefs, and similar hopes. When one identifies with such a community there is a confluence of one's personal history, which arises in community, with the history of the community of which one is or becomes a part. This phenomenon is central in the forming of identity of person-in-community. Identity is a complicated phenomenon as Erik Erikson and others have clearly demonstrated.[2] Erikson, for example, applies different connotations to the term identity. At one level he refers to a self-awareness of one's own

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[2]See Erik Erikson's "The Problem of Ego-Identity" in his *Identity and the Life Cycle* (New York: International Universities Press, 1959), pp. 101ff.

uniqueness. At another level he refers to an "unconscious striving for a continuity of experience," as well as having a "solidarity with a group's ideals."[3] Eriksen describes the process of identity formations as

a psychological process reflecting social processes, but with sociological means it can be seen as a social process reflecting psychological processes; it meets its crisis in adolescence, but has grown throughout childhood and continues to re-emerge in the crises of later years.[4]

As discussed previously the three central elements of identity include the definition of self, the state of congruence between the self and the requirements of the environment, and the expectation that this congruence will continue. The dynamics of identity are expressed by Erikson's concepts of "mutuality" and "sameness." These dynamics are central in explaining the linking of the individual with community. The dynamic of mutuality refers to the "identity of something in the individual's core with an essential aspect of a group's inner coherence," meaning that an "individual must learn to be most himself where he means most to others—these others, to be sure, who have come to mean most to him."[5] Mutuality expresses the confluence of one's personal history with the history of his community. Identity, "expresses such a mutual relation in

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[3]Erik Eriksen, Identity: Youth and Crisis (New York: Norton, 1968), p. 208.

[4]Erik Eriksen (ed.), "Youth: Fidelity & Diversity," in his The Challenge of Youth (Garden City: Doubleday, 1965), p. 13.

[5]Eriksen, Identity and the Life Cycle, p. 102.

that it connotes both a persistent sameness within oneself (self-sameness) and a persistent sharing of some kind of essential character with others,"[6] i.e., a state of congruence between the self and the community and its requirements.

The other dynamic of identity is having a "sense of sameness." This means that for an integrated identity there must be a continuity of sameness of one's past, present and future. If there is a break or a radical change in this continuity there is, as Erikson describes, identity diffusion or confusion. If a person moves to a foreign country and experiences cultural shock, it is because he no longer has a sense of sameness. His new community has a different history, different values and perhaps different goals for life. What he experiences is an identity crisis. If he is to make this new community his home he must find a new basis of mutuality by internalizing a new history to establish a new sense of sameness, and, thereby resolve his crisis of identity.

The thread of continuity that offers this "sense of sameness" through time is the individual's faith. The religionists of old have long known the importance of faith in one's life. In the Judeo-Christian tradition when we speak of faith, we also speak of love and hope. We now turn to theology to further enlighten our understanding of identity utilizing not only the concept of faith,

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[6]Ibid.

but also the Christian understanding of hope and love as a basis

for a continuity of sameness throughout the course of one's history.

A. Faith

The human being by nature is a meaning-seeking creature.
Viktor Frankl claims that if a person can discover a "why" for
living, he will surely find a "how."[7] The fact that any of us is
still living means we have at least some tentative answers as to
"why." H. Richard Neibuhn similarly states, "As long as a man lives
he must believe in something for the sake of which he lives; without
belief in something that makes life worth living man cannot exist."[8]
In this light, Niebuhr claims that an individual's inner history is
"always an affair of faith."[9]

Not only must each person discover a "why" for living, each
is plagued by many possibilities. When no possibilities seem evi-
dent, each of us ascribes meaning to fallible things such as our
work, or talents, or to another person, group or community, or to
some valued thing or being as our source of life's meaning. Being
a rational creature, man is a believing creature. It is an

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[7] Viktor Frankl, Man's Search for Meaning (New York: Wash-
ington Square Press, 1963).

[8] H. Richard Niebuhr, The Meaning of Revelation (New York:
Macmillan, 1962), p. 77.

[9] Ibid.

inescapable part of human existence to have a faith that life is worth living as well as an object or objects as reference points for this meaning.

Niebuhr observes that faith in such objects, which he would call gods, is inseparable from one's internal history. "It is the gods that give unity to the events of personal life."[10] He further says that a person has one internal history so far as he is devoted to one value. Most people, however, have many loyalties and vacillate from one to the next to the other. The consequences of this in terms of identity is that an identity is developed in relationship to each object of devotion. Thus, if a person has more than one god he would have more than one identity. The more identities one has the less clear is any one identity, the result being what Erikson refers to as identity diffusion or confusion. Niebuhr makes an important contribution to our understanding of identity formation by claiming that the key dynamic is having a single god:

> Without a single faith there is no real unity of self or of a community, therefore no unified inner history but only a multiplicity of memories and destinies. Inner history and inner faith belong together, as the existence of self and an object of devotion for the sake of which the self lives are inseparable.[11]

Niebuhr is affirming that "to be a self is to have a god is to have history, that is, events connected in a meaningful pattern."[12]

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[10]Ibid., p. 78.   [11]Ibid.   [12]Ibid., p. 80.

As we look to our past we must recognize that we have been individually and corporately influenced, if not melded, by infinite numbers of events out of our past. To make a meaningful pattern of our history we must assign a high order of priority to some events and use them as a normative for interpreting other events. For example, the events of 1066 are normative for the English as is what happened in 1948 for modern Israel. For we of the United States the Spirit of 1776 is normative. How our forefathers responded in the American Revolution is normative in terms of how we tend to handle current revolutions and social problems. Remembering the past and drawing upon memories it evokes allows us to anticipate the future and, thereby, give meaning to the present.

Niebuhr describes such events from our past as revelatory. "Revelation," he says, "refers to that intelligible event which makes all other events intelligible."[13] We choose certain events around which we appropriate the past and hope they give meaning to other events. In this way we begin to create a pattern of higher coherence out of our past and begin to see direction emerging in regards to our future. Revelation is to draw aside the veil—to make clear for us all that would otherwise be meaningless facts or unconnected, unrelated experiences. It makes clearer our own self-understanding. By revelation, therefore, we mean

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[13]Ibid., p. 93.

that something has happened to us in our history which conditions
all our thinking and that through this happening we are enabled
to apprehend what we are, what we are suffering and doing and
what our potentialities are.[14]

The revelatory event for those of us who identify ourselves
with the Christian community is Jesus Christ. We confess that God
acted uniquely through Jesus, whom we identify as God's son and as
our Christ. The crucifixion-resurrection event is that event which
makes all other events intelligible. This event conditions our
thinking as well as our world view. It is the focal point of our
identity and gives unity of self. It offers meaning in the face
of suffering. It provides purpose for our doing. It brings to
light possibilities for our future. The revelation revealed in the
historical event of Jesus Christ's crucifixion-resurrection "points
to something . . . more fundamental and more certain than Jesus or
than self. Revelation means God, God who discloses himself to us
through our history. . . ."[15]

While God is the object of devotion, it is also true that we
have other loyalties. As social creatures each of us have many
social roles to play in life. A man may be a husband, a father, a
businessman, a churchman, a member of a community service organi-
zation and a member of a hobby-interest group. Accompanying each
role will be a certain degree of loyalty. We must recognize that the
person-in-community has many loyalties, some of which will come into

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[14]Ibid., p. 138.   [15]Ibid., p. 152.

conflict at times. Yet Niebuhr claims that there can be no unity
of self without a single loyalty. General system theory of hier-
archy of systems offers a solution. If life is looked upon as a
large system, it can be broken down into subsystems with each sub-
system specifying a particular role and loyalty. Since any system
is greater than the sum of its subsystems, in terms of loyalty or
faith, there can be a single loyalty that supersedes all others.
When this takes place in a person's life there is an integration of
one's history and faith resulting in a unity of selfhood.

We have thus far discussed revelation in terms of the indi-
vidual and his developing unity of selfhood. Revelation, however,
is to be understood primarily as communal, i.e., community in
history.[16] As we have been indicating, person-in-community is a
unitary concept. An individual comes into being in relationship to
his community--a community that has a history. The person is,
consequently, shaped by that history. "We are in history," observes
Niebuhr, "as the fish is in water and what we mean by the revelation
of God can be indicated only as we point through the medium in which
we live."[17] We must be clear at this point not to equate revelation
with history if revelation means God.[18] Rather God is revealed to
man--man as a being in community with a history. It is not that
history is the cause or source of revelation, but rather that an

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[16]Ibid., p. 20f.   [17]Ibid., p. 48.   [18]Ibid., p. 54.

encounter with God by an individual is an encounter whereby the individual is conditioned by his history. A person, however, is conditioned by history only as he lives with other men, which is man's situation, and shares in the history of his community.

For the Christian his communal existence is the Christian community. This community was occasioned by God's revelation through Jesus Christ which happened in community amidst the people with whom Jesus found himself. God humbled himself through Jesus to speak his inexhaustible Word among his people who were not feee, but bound and limited. Jesus prodded his people to expand their inner horizons and to grow in response to God's Word to love their fellowman. Jesus' disciples, the people to whom Jesus ministered, the early Christian community, the Biblical writers, the witnesses of the community of the faithful through the centuries, all testify to this revelation of the "good news" of God's Word. To be a Christian is to be a member of this historical community of the Christian faith. These Christian witnesses have made their twisting pilgrimage through history in response to the Word present in every moment of history. Being a member of this historical people means that the Christ that confronts each of us in the present cannot be separated or isolated from our historical community of witnesses "who surround him, point to him . . . and direct out attention to

to his relation with the Father and the Spirit."[19] On the other hand, if this testimony to God's revelation is to have any truth for us, each of us must directly encounter Christ in our own lives.

The conversion of Saul is but one of many illustrations demonstrating an existential encounter with God which subsequently only had meaning in the context of the early Christian community. While on his way to Damascus, with the clear purpose to seek out Christian disciples to persecute, Saul encountered God who revealed himself as the Lord whom Saul was persecuting. Saul was struck blind. His vision was darkened. He could not see that up to that point in his life he had always been walking in darkness. It was within the Christian community that Saul regained his sight, symbolized by Ananias. When the scales fell from his eyes, it was as if a veil had been drawn aside allowing him to see as he never had seen before. The clarity of his vision caused him to turn his life around from one who persecuted the Lord to one who confessed Jesus as the Son of God. While Paul's experience was existential, it took place within the context of the Christian community of which he became a part. While each of our encounters with God is individual, our encounter with God is at the same time in and through our community. It is for this reason that Christianity is a community religion. While our encounter with Christ is individual,

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[19]H. Richard Niebuhr, Christ and Culture (New York: Harper & Brothers, 1951), p. 245.

it is not individualistic, as we do not encounter a solitary Christ, but a Christ of history. A Christ known only through witnesses can be no Christ for us. Therefore, Christ for us must be encountered and become part of our personal history which flows together with the history of the Christian community.[20]

To summarize thus far, we have said that the individual's selfhood comes into being in community. The model of man, as described by Mead and Winter, shows that man is both a social product and an individual, and that this is an important aspect towards understanding selfhood. The individual does develop a sense of identity and continuity in terms of the feedback he receives of the images people have of him. The individual is free, however, to transform this feedback by accepting, rejecting, or modifying the input he receives from others. The degree of self-identity and continuity is determined by the clarity of purpose—the "why"—the person's reasons for living. It is against this purpose that he can evaluate the input he receives from others and respond accordingly. This suggests the other important aspect of selfhood. The purpose each of us has in life reflects that to which we are committed. The more loyalties we have in life the more diffused is our identity as we will not know which loyalty to use as our criterion of evaluation for our response. It is for this reason we have agreed with Niebuhr

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[20]Ibid., p. 246.

that to have one god is to have one history, which is to have a single identity. As members of the Christian community we confess that the one God is the God revealed to us through Jesus Christ, who is made known to each of us through the witnesses of our faith throughout the history of the Christian community, and who is encountered personally in each of our lives.

There are, therefore, two major aspects of faith. First, faith is dependent upon authorities and a whole host of witnesses creating our history to the present. Second, the heart of faith is our own self-understanding. As members of the Christian community we choose to give our full allegiance to God as made manifest in and through Jesus Christ. It is the relationship to Christ that gives us our sense of belonging to the Christian community. It is our faith, our single loyalty that provides a solidarity of our identity and is the thread of continuity out of our past, through the present and into the future. Therefore, just as our concept of the person-in-community claims that we cannot separate the person from his community, so too does "God and the history of selves in community belong together in inseparable union."[21] This being so, the Christian is viewed as person-in-Christian community.

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[21]Niebuhr, Meaning of Revelation, p. 80.

B. Hope

The life long process of identity formation of the complex
system person-in-community involves a complicated process of
differentiation and the reintegration of new data growing to an
expanded steady state. Basic to identity formation is having a
single faith. As persons-in-Christian community our faith, which
is a central-dynamic operating throughout all our life, is deeply
rooted in the history of our community. Arising out of our faith
is hope, which opens the way into our future. As our past is very
important and influential in our present lives, so too is our future.
We now turn to examine the importance of our future with particular
emphasis upon Christian hope.

Hope arises in faith. As we have discussed, central to the
faith of the Christian community is the normative, revelatory
event of Jesus Christ's crucifixion-resurrection. Christians ap-
propriate meaning from this event in the past and see it as giving
direction for the future. It is because of the resurrection of
Christ from the dead that Christians have hope for the future--
hope not in the forces of man or in forces already present in the
world, but in the power of God which is yet to come. The resurrection
is the bedrock of Christian faith. It serves as the promissory
note of the life to come: that our own history which is part of the
whole of history will not end in nothingness but in the coming
Kingdom of God and the transformation of human history. As Paul

writes, "If Christ has not been raised, then our preaching is in vain and our faith is in vain. . . . But in fact Christ has been raised from the dead, the first fruits of those who have fallen asleep" (I Cor. 15:14, 20).

The human being is a creature who by nature lives by hope. Without hope life is meaningless. Hope is that which keeps life flowing and free. Man, then, is either "burdened" or "blessed," depending upon one's outlook, with the necessity to discover meaning for one's life—to have a "why" for living. Without a reason for living and without any hope in the future, life becomes hell and death results either physically or at least psychologically and spiritually. For example, the characters in Sartre's play, No Exit,[22] all have an unforgettable past, but their future appears cut off. With no future and no hope, they feel trapped in the present and experience life as hell or a "living" death. In contrast to Sartre's hopeless characters, Robert Coles, in his study of the rural poor in the South, found a depressed people full of hope. Among the groups of victims of poverty, whose seemingly hopeless day to day life was one of hellish, physical endurance and hardship, Coles discovered a people who are well rooted in the Christian faith and have great hope in the future—particularly life after death.

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[22]Jean-Paul Sartre, No Exit and Three Other Plays (New York: Vintage Books, 1946).

It is through this hope that they together found meaning in their
present situation of suffering.[23]

The person-in-community is a creature of hope. While the
past is important in understanding any individual, we must agree
with the existentialist's corrective of those who held a deter-
ministic view of mankind and recognize the fact that we human beings
must be understood not only backward but forward. Psychologists
such as A.H. Maslow, Gordon Allport, Rollo May and Erich Fromm, and
theologians such as Jürgen Moltmann, Friedrich Gögarten, and Huston
Smith have underscored the importance of future-time for an under-
standing of man. Maslow, for example, holds that only the flexibly
creative person can really manage the future. The real person, he
would say, mainly determines himself; thus hope in an underlying
philosophy of values is necessary for growth.[24] Huston Smith in
his book, Condemned to Meaning,[25] calls hope one of the basic
structures for an adequate life. Man, he believes, is the self-
transcending being who has a future. For him this is no mere
speculation, but rather, he says, "is the first fact that a true

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[23]Robert Coles, "God & the Rural Poor," Psychology Today,
V:2 (January, 1971), 33ff.

[24]Abraham Maslow, The Farther Reaches of Human Nature (New
York: Viking Press, 1971).

[25]Huston Smith, Condemned to Meaning (New York: Harper &
Row, 1957), p. 3.

psychological empiricism can make out."[26] Moltmann views hope as keeping life from becoming stagnant and that "hope alone keeps life --including public, social life--flowing and free."[27] The nature of institutions, as with all systems including the individual, is towards stabilizing of things. By raising the question of meaning, particularly in relationship to the system's goals or its hopes, is to make things "uncertain and keep them moving and elastic in the process of history."[28]

While hope is essential for the person-in-community, a characteristic of hope is that it is communal in nature. We have affirmed that man is a social creature who has no selfhood apart from his relations to other human selves. Every "I" comes into being in a "We" relationship. H. Richard Niebuhr's concept of "social existentialism," which he applied to decision making, is also applicable to hope. "We raise our existential questions individually, doubtless, and we do not forget our personal, individual selves. But the existentialist question is not individualistic; it arises in its most passionate form not in our solitariness but in our

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[26] Jürgen Moltmann, Theology of Hope (New York: Harper & Row, 1967), p. 324.

[27] Ibid.,

[28] Niebuhr, Christ and Culture, p. 244.

fellowship."[29] Similarly, hope is individual, but it is not individualistic. Hope is reoted in community.

Our hope is ultimately expression of our hope for salvation. While each of us tend to think of our own personal salvation, there are deep roots in our Biblical faith relating our salvation to that of the people of God or our community's salvation. In the Old Testament it is the conviction of the Hebrew people that God had saved them from destruction and was fulfilling his purpose of salvation. The historical experience of God's deliverance of Israel from Egyptian bondage at the Red Sea formed the basis of the belief that God was the Savior of Israel. In the Bible the historical is transmuted by the eschatelogical so that the action of God in the past becomes the type or foreshadowing of his action in the future. The salvation accomplished in history is the premise and warrant of the salvation that shall be in the end time. This biblical conception of salvation is not based upon some philosophical or theoretical theory, but upon Israel's experience of salvation in history. It is both personal as well as communal. The predominant understanding of salvation as well as judgment in the Old Testament is communal in nature. Prophets such as Amos and Hosea speak concerning the doom of Israel because as a people they have forsaken their God and have worshipped idols. While they are speaking to individual

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[29]Moltmann, op. cit., p. 329.

hearers of their prophecy calling for a change of heart in each of

all the people of Israel, what they are speaking about is the grave

social, economic and political injustices and they warn of the doom

of the nation Israel as just punishment. In spite of the judgment,

Hosea proclaims that God will restore his people.

> How can I give you up, O Ephraim! How can I hand you over, O
> Israel! . . . My heart recoils within me, my compassion grows
> warm and tender. . . . I will not again destroy Ephraim; for I
> am God and not man, . . . and I will not come to destroy.
> (Hosea 12:8f)

Salvation (soteria) in the New Testament still fundamentally

means, as it did in the Old Testament, God's saving action in history,

but now through his son Jesus Christ. The Synoptic gospels represent

the ministry of Jesus as concerned with the work of salvation:

"The Son of man came to seek and to save the lost" (Luke 19:10).

They represent Jesus as teaching that his mission concerns the lost,

or the lost sheep of Israel (Matt. 10:6, 15:24; Luke 15:3-10).

The distinctive feature of his doctrine of salvation is that it is

offered to sinners. The mission of Jesus, whose object is salvation,

is closely bound up with the forgiveness of sins. This is clearly

brought out in the miracle stories of healings, in which the for-

giveness of the person healed is emphasized. The formula "Your faith

has saved you" is applied to the sick who have been healed (Mark 5:34,

10:52; Luke 17:19). The miracle stories of healing are parables

of salvation; they are signs of who Jesus is, at least to those who

have eyes to see--i.e., those who have faith in him. Salvation in

this New Testament sense concerns itself more with the salvation of

the individual soul. Moltmann, drawing upon the eschatological back-

ground of the prophetic tradition, particularly Isaiah, says that

> salvation must also be understood as shalom in the Old Testa-
> ment sense. This does not mean merely salvation of the soul,
> individual rescue from the evil world, comfort for the troubled
> conscience, but also the realization of the eschatological
> hope of justice, the humanizing of man, the socializing of
> humanity, peace for all creation.[29]

Salvation of the individual, then, must also be seen in light of the

salvation of mankind. This would be application of Niebuhr's con-

cept of social existentialism to hope, that while hope is individual,

it is communal in nature. This is part of what we mean when we view

the individual as person-in-Christian community.

In addition to hope being communal, another characteristic

of hope is that it is contagious. The real test of hope is its

ability to endure in the presence of one who is hopeless, for genuine

hope must of necessity be humble and selfless, thus outgoing; and so

it can help another to know that, even in his despair, someone is

concerned about him. As many counselees do testify that what helped

them most was that they found themselves lifted by the presence of

someone who, perhaps only through silence, radiated hope and thus

communicated to them that someone cared.

Finally, hope is ultimately grounded in the eternity and

power of God. It is becoming increasingly evident that meaning of

life cannot be found in simply rearing children, or earning a living

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[30]Moltmann, op. cit., p. 329.

er living to ourselves only. Meaning must be related to a larger
cause which embraces all mankind. Tillich raises the question
whether we have a right to hope beyond all finite hopes, and answers
positively by suggesting that the ultimate hope in the eternal
which encompasses death can be justified because we are able to
experience the eternal "here and now."[31] Our self-transcendence
means that we are both finite and also above our finiteness. When
the Christian participates in the celebration of the Eucharist he
is symbolically experiencing the crucifixion-resurrection event as
the eternal "here and now." Through this experience there is an
awareness of the eternal and a participation in it. For the
Christian, death, consequently, is not viewed as the end of life, but
rather death is viewed through life. Death is something that has
already happened as one buries himself in allegiance to the meaning
of his own hope in Christian community. As Paul affirms, "We were
buried therefore with him by baptism into death, so that as Christ
was raised from the dead by the glory of the Father, so too we
might walk in newness of life" (Romans 6:4).

The power of God is viewed in reference to the coming of
his kingdom. One of the basic questions for modern man living in
the kingdoms of the world is how his present activities, his present
institutions and structures, relate to the future and influence its

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[31]Paul Tillich, The Eternal Now (New York: Charles Scrib-
ner's Sons, 1963), pp. 122ff.

outcome. Is there a direct line between his present efforts and the coming Kingdom of God? Walter Rauschenbusch and others of the "Social Gospel" era did see a direct line as they sought to establish the goals of the Kingdom of justic, peace, humanizing man, right-eousness and freedom. Reinhold Niebuhr answered in the negative. The Christian, according to Niebuhr, recognizes that because of the power of human sin, from which no political, economic and social structures are free, there is no direct line of development from any human institution into the Kingdom of God. Because man is still in the bondage of sin, despite all his educational and technological progress, he must look beyond his own power for the final coming of the Kingdom of God, for the redemption of his body, and for the redemption of the created world.[32]

C. Love

Our faith is the basic dynamic of integrating our identity. It provides a thread of continuity giving us a sense of sameness throughout our past, present, and future. Our faith is the embodi-ment of who we are. Through our faith we incorporate our past, the collection of memories of our community of faith, and it is the basis of our hope. Hope gives us certainty and rests upon premises of an assured future. This identity and premise culminate in a contentment

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[32]Reinhold Niebuhr, The Nature and Destiny of Man (New York: Charles Scribner's Sons, 1941), I, 246.

or ability to be, which gives us a stance to be free in expressing and receiving love. The past and the future always meet in each successive "now" of the present. While faith and hope cannot be limited to the past and future, respectively, the expression of our faith and hope is continually acted out in each successive moment of the present through love. As St. Paul affirms, faith and hope are meaningless unless we have love (I Cor. 113).

The meaning of love is complex. The word "love" must, by lingual necessity, serve to express the infitite range of love in all its human and divine aspects. The desire and fulfillment of sexual life, the ethical spirit of good will toward one's neighbor, the aspiration of the mind for the ultimate good, the gracious spirit of God's redemptive action—all these are meanings which the word "love" suggests and which it must embrace. The Greek language, having several words for love, offers more flexibility. In the New Testament the word used for love is _agape_ and means the love which God shows in the giving of His Son for mankind. Love is of God and is experienced in relationship—an I-Thou relationship. The New Testament usage of _agape_ points to the ultimate nature of love in God and in human life. It both gathers up the meaning of the right-eousness, mercy, and love of God expressed in the Old Testament and makes redemptive love the foundation of the Christian understanding of love. So St. Paul declares, "God shows his love for us in that while we were yet sinners Christ died for us" (Rom. 5:8). And the

Johannine writer concentrates the entire doctrine of God in the ene statement that "God is leve (agape)" (I John 4:8).

The meaning ef the act ef leve is captured by Frank Kimper's definition: "Te leve is te perceive a person to be precieus merely because he is a human being. Precieus means ef immeasureable value er werth."[33] Christian leve is the seurce frem which men learn te attribute value te human persens. Christian leve is uncenditienal, with ne strings attached. The misunderstanding ef leve, accerding te Kimper, is te make leve cenditienal, i.e., we attach strings. Seme strings we eften attach are: "I'll leve yeu if I like yeur bedy and appearance." "I'll leve yeu if yeur theughts are agreeable te mine." "If yeu perferm well and de what I ask, I'll leve yeu." "I'll leve yeu if yeur talents are pleasing te me." Leve cannet be based en any cenditiens. It is uncenditienal. God loves each ef us in spite of what our body may leek like. He leves irrespective ef eur theughts. God leves us in spite of eur peer perfermance and regardless of our talents. To love is to acquire this same uncenditional attitude ef leve which will affect all eur thinking and acting with others in the world.[34] It is an orientatien of character which determines the relatedness of a persen to the world as a whele. . . . If a persen leves enly ene ether person and is

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[33]Frem an unpublished lecture given in a Retreat in 1971.

[34]Ibid.

indifferent to the rest of his fellow men, his love is not love but a symbiotic attachment.[35] God's unconditional love is the only perfect love. Because we are finite creatures, we are limited. Our love is always less than perfect and probably has with it some string attached. Since we could always do better, our goal is to keep striving toward being able to attain and maintain an attitude of unconditional love.

The act of loving is primarily one of giving, not receiving. Giving does not necessarily mean "giving up" as Fromm observes.[36] Rather giving is the highest expression of potency. "In the very act of giving . . . I experience myself as overflowing, spending, alive, hence as joyous."[37] Jesus also was aware that loving was an act of giving as the writer of Acts claims that Jesus taught that "there is more happiness in giving than in receiving" (20:35).

How are we to account for this phenomenon of loving being primarily giving? We begin by affirming with Dr. Kimper that every person senses that he or she is precious. Our inner being is already grasped by God and we know we are of immeasureable worth.[38] Defense mechanisms are automatic reactions to affirm the priceless

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[35]Erich Fromm, The Art Of Loving (New York: Harper, 1956), p. 46.

[36]Ibid., p. 22.

[37]Ibid., p. 23.

[38]Kimper, op. cit.

nature of ourselves. We withdraw, for example, to protect our treasured being when not being treasured by others. Psychiatrist William Glasser claims that there are two basic psychological needs: "the need to love and be loved and the need to feel that we are worthwhile to ourselves and to others."[39] While we may sense that as part of God's universe we are also creatures who <u>need</u> to be affirmed of the fact of our pricelessness. To love others as we love ourselves is to see others with the same need to be affirmed. By giving our love and affirming others, we thereby create the atmosphere in which the other can also respond in love. As paradoxical as it may seem, by giving love, we receive love. Through loving, barriers between two persons can be penetrated. With reconciliation community can be created where none would otherwise exist. As Paul Ramsey states: "Christian love enters the "no man's land" where dwell the desperate and the despised outcasts from every human community, and brings community with them into existence."[40] In such a community of Christian love, one in turn receives love. Love in Christ is the force that holds the community together.

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[39] William Glasser, <u>Reality Therapy</u> (New York: Harper & Row, 1965), p. 9.

[40] Paul Ramsey, <u>Basic Christian Ethics</u> (New York: Charles Scribner's Sons, 1950), p. 242.

While love is unconditional, there are however, conditions for living together. This does not mean that we are not free. On the contrary, being free is the nature of being. We are never satisfied with conforming to other's expectations for us. We affirm our freedom by affirming our own individuality. We are free to make up our own mind on matters. We are free to experience relatedness with others. Freedom as life is priceless. There are no limitations put on our expression of freedom to love and to be loved. There are, however, limits put on the results of our expression of freedom. Not to restrain our expression of freedom is impractical, and further the universe will not tolerate it. We are free, for instance, to jump off a high building, but the universe will not allow our survival. Jumping would be our last free act in life.

The ancient fathers of our faith were aware of the laws of God and the universe. As we read in Deuteronomy:

> I call heaven and earth to witness against you this day, that
> I have set before you life and death, blessing and curse;
> therefore choose life, that you and your descendants may live,
> loving the Lord your God, obeying his voice, and cleaving to
> him; for that means life to you and length of days, that you
> may dwell in the land which the Lord swore to your fathers, to
> Abraham, to Isaac, and to Jacob, to give them. (30:19f.)

It is clear from this testimony that the freedom of mankind has long been affirmed in our community of faith and respected by God. God always offers us options and, depending upon our choice, we will either be blessed or cursed. In all our decisions which we are free to make, we are always confronted with choosing life or choosing death. If we choose death that means we have chosen evil, with the

consequences being pain, hate and turmoil. If we choose life our

choice is good and joy, love, and peace will be ours. Even if we

must bear the cross, ultimately our inheritance will not be death,

but life through resurrection.

It is clear that wiser choices on our part would result in

health and joy. But since each of us is finite, i.e., limited, we

are never sure which choice is the wiser. Thus, each choice is a

risk. We can never fully calculate the consequences of our decisions.

Paul in his letter to the Galatians also speaks in a simialr

vein concerning freedom. He says, "Brothers we have this precious

gift of freedom, but we are not free to do as we please" (5:13 para-

phrased). According to Paul we are free to express love and bear

the fruits of the Spirit, meaning life, or we can choose to gratify

the desires of the flesh which leads to death and separation. Paul

makes clear that to love our neighbor as ourselves has the authority

of the universe behind it. He also describes specific forms of

behavior of love to affirm others as precious, as well as the con-

sequences of not loving which leads to separation, isolation, and

finally death. The note is rung loud and clear that while there

are no conditions for loving, as love has no conditions, there are

conditions for living together. We are given the freedom which is

sometimes burdensome, to choose whether or not to live in love and

obey the universal law of love. The consequence of obedience is

fulfillment in our relationships with others and fulfillment in life.

The consequence of disobedience is broken relationships which

ultimately leads to our death. Viktor Frankl affirmed, even after
having survived the experience of a Nazi concentration camp, that
when it appears that all freedoms are taken away, one still has the
freedom to decide what kind of attitude one will have—even an
attitude of love amidst an army of hate.

D. Commitment: A Paradoxical Discovery

Faith, hope and love as understood in the Christian tradition
provide the dynamics so important in identity formation, i.e.,
having a continuity of a sense of sameness throughout our past,
present and future. The essential dynamic that provides the thread
of the continuity is our faith, which is the basis of fidelity.
Fidelity is the vital strength that is central to our most passionate
striving for becoming what we become. It is fidelity that gives us
an "opportunity to develop, to employ, to evoke—and to die for."[41]
Fidelity is a basic virtue which "can only arise in the interplay
of a life stage with the individuals and the social forces of a
true community."[42]

To speak of fidelity is to raise the question of commitment.
We can discover to what or to whom we are faithful by asking the
question, "To what or to whom are we ultimately committed?" For us

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[41]Eriksen, _Identity: Youth and Crisis_, p. 233.

[42]Ibid., p. 235.

whose central identity is that of being a Christian our answer is to
affirm that we are ultimately committed to God as revealed through
Jesus whom we call our Christ. It is this commitment that allows
us to continue to develop and grow in faith, hope and love. It is
this commitment that evokes our continual response in each and
every moment using the criteria of our faith, hope and love. It is
this commitment that evokes our continual response in each and every
moment using the criteria of our faith, hope, and love as direction
for our action. It is this commitment that paradoxically allows us
to be free.

Can it be that through commitment we find freedom? We can
only be fully defined as persons as we commit ourselves to the kinds
of forces that emerge out of normative events from our past and
future. For only in this way by appropriating the usable past are
we liberated, freed for a future direction that can give meaning to
the present. Failure to do so results in not being free. While
admittedly it is paradoxical, to be free is to know to what we are
committed. We are free when we can let our lives be submitted to
the forces which flow out of creative, revelatory events of the past
that we choose to be meaningful for us. As Christians we choose to
surrender ourselves to God as revelaed to us in what is for us the
central revelatory event, the crucifixion and resurrection of Jesus
Christ.

When we affirm as Christians the crucifixion-resurrection
event we are free for we know to whom we are committed. We can say

no to the state without fear when it involves itself in dehumanizing
activities be they Auschwitz or Viet Nam. We are free to say no to
social groups that pressure us when we clearly know our commitment.
In times of suffering we know there is liberation that will one day
come. In times of decision, since we already knew our decision, we
can be free to act.

E. The Church and Celebration

We have discussed the importance in identity formation of
having a continuity of a sense of sameness throughout one's life.
We turned to theology to further enlighten our understanding of
identity utilizing the concepts of faith, hope, and love as a basis
for a continuity of sameness throughout the course of one's exis-
tence. If there is a break in the continuity, or any dimension is
missing, the unity of life begins to come apart, and life becomes
devoid of the kind of meanings it could otherwise have.

The literary artists are sensitive about this understanding
of people. Samuel Beckett, in his play Waiting for Godet,[43] por-
trays characters who seemingly have the possibility of a future.
The characters spend their time aimlessly wandering and waiting.
Their situation is that the future holds little hope for them and

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[43]Samuel Beckett, Waiting for Godet (New York: Grove Press,
1954).

thus is devoid of meaning. Beckett accounts for this problem in the fact that these characters are cut off from their past as they cannot seem to remember what has gone on before in their life, and consequently, do not know what to do in the present because they do not know what to expect. Being cut off from their past, Beckett's characters have little to draw upon for their future and, consequently, they have no present as life is merely "putting in the time."

We have mentioned Sartre's No Exit in which his characters all have a past, but are cut off from the future, so the present becomes a hell from which there is "no exit."

For a fully human existence, then, we need to appropriate usable events out of our past, which in turn give meaning to other events. In this way we begin to create a pattern of higher coherence out of our past which gives direction for our future and, thereby, gives meaning and purpose to our present. For example, the ongoing life of the Christian can be defined from the crucifixion-resurrection event. We appropriate this event from the past and see it giving meaning for our future in that if there are to be further crucifixions, there can also be further resurrections. In light of these realities we can make creative use of the present. Dietrich Bonhoeffer, in his Letters and Papers from Prison,[44] testified that during his suffering in prison only a suffering God could comfort

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[44]Dietrich Bonhoeffer, Letters and Papers from Prison (New York: Macmillan, 1957).

him. The crucifixion became central and most meaningful to him. When he contemplated his forthcoming death, the resurrection event then became central, giving him hope for the future, which was comforting in the present and gave menning to life.

The question may rightly be asked, "how do we appropriate the past and future into our present lives?" Harvey Cox gives the clearest answer in one word: celebration! He describes man as homo festivus and homo fantasia.[45] Human beings are the only living creatures who celebrate--an activity involving both festivity and fantasy. "Festivity is a human form of play through which man appropriates an extended area of life, including the past, into his own experience."[46] It is not a possibility for us to have our feet washed by Jesus; but if we participate in a celebration of foot washing this past experience of Jesus washing his disciples' feet can become our experience. "Fantasy," on the other hand, "is also uniquely human. . . . If festivity enables man to enlarge his experience by reliving events of the past, fantasy is a form of play that extends the frontiers of the future."[47] Through experiences of celebration we can incorporate into the present memories from the past and expectations of the future. Celebration is never an

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[45]Harvey Cox, Feast of Fools (Cambridge, Massachusetts: Harvard University Press, 1969), pp. 10f.

[46]Ibid., p. 7.   [47]Ibid., p. 8.

isolated, individualistic happening, but rather takes place in community. A paradigm for Christians is the celebration of the Eucharist. In the words of institution during the act of celebration the past is appropriated in a way that anticipates the future and thereby invests the present with a special kind of meaning. The drama of the last supper with our Lord is reinacted with the breaking of the bread and drinking from the cup. "Do this (now) in remembrance of me (past)" and do this until the Lord comes (future) "as oft as you shall (eat and) drink" (I Corinthians 1:24ff). Clearly, in the celebration of the Eucharist we reaffirm in the fellowship with one another the revelatory crucifixion-resurrection event of Jesus Christ, which incorporates this past event and the faith of the whole Christian community through the years into present experience, as well as the hope we share with all Christians concerning our future as revealed in Christ's resurrection. Truly, in celebration, faith and hope meet in love. Faith gives us clues as to what to expect, and what we expect helps us to interpret our memories. This provides the identity and confidence that enables us to give and receive love (agape).

The church as a worship center is a celebrating community. As such it provides its members this identity and confidence. Each week in the celebration of worship, the good news of the past meets the challenge of faith for now and then points to the infinite possibilities awaiting us in the victory of Christ in the future. Through worship the individual's own history merges with the

history of the community of faith, which offers each worshipper a

continuity with the past and with hope for the present and future.

His life is based on the solid foundation of his Christian faith

enabling a unity of life as over against the crumbling foundation

of idolatrous gods leading to identity diffusion. The church, then,

as a celebrating community offers a fundamental basis for mental

health and spiritual well-being, namely, the unity of life with an

identity as person-in-Christian community.

II. THE CHURCH AS AN INSTITUTIONAL SYSTEM

We have discussed the importance of both psychological and

sociological processes in identity formation. By utilizing systems

theory we are able to view the individual and his social systems

as a unitary whole. Our concept of person-in-community is recogni-

zing that while we can focus upon the individual, the person cannot

be fully understood apart from all that to which he is related.

The Christian, then, is part of the system, person-in-Christian

community, and this community is the church. But what is the

church?

German theologian Günter Krusche, utilizing system theory,

defines the church as a "dynamic, purpose-oriented, self-regulating

system."[48] Krusche observes that the apostle, Paul, without being

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[48]Günter Krusche, "The Church & Cybernetics," A Study for
World Council of Churches, p. 121.

familiar with the term, system, described the Church as a system

when he wrote:

> Rather, speaking the truth in love, we are to grow up in every
> way into him who is the head, into Christ, from whom the whole
> body, joined and knit together by every joint with which it is
> supplied, when each part is working properly, makes bodily
> growth and upbuilds itself in love (Ephesians 4:15f).

A. A Dynamic System

The church is a dynamic system. Viewed historically, the

church has grown from a small group of disciples to be a totality

that encompasses the globe. The church has withstood many attacks,

many changes in the world, and has been able to grow, and adapt, and

be in the world. Viewed theologically, the New Testament teaches

that the church as the people of God always appears to be oriented

forward. The proclamation of the coming Kingdom of God is a future

goal of the lordship of God. The church of God has been and is in

the process of becoming. It is not static. This can be seen in the

tension that exists between the "already present" and the "not yet."

It is precisely this tension that accounts for the dynamism of the

church. This tension is further evident by the existence of the many

paths which point toward the goals of the church as is represented

by the many denominations and confessions. Yet amidst the diversity,

when we consider the equifinality of the system, church, there is a

unity. Equifinality suggests that from many different starting

points, the goal can be the same. It is just possible, then, that

in a pluralistic age an ecumenical church can emerge by finding

unity in plurality. The church is also a dynamic system when viewed from an institutional point of view. The church consists of many elements. As a system, however, it is not as important to examine the individual elements as it is to study the effects of the elements upon one another. The totality of the system church is not merely the sum total of all its parts, but is far greater when we consider the dynamic interaction of all the parts. To view the church as dynamic, then, is not only to ask what exists, but more importantly, what is happening.

B. A Purpose-oriented System

The church is purpose-oriented. The continued existence of any system must exhibit equifinality. Most systems by their nature have a multiplicity of purposes. While many theologians have ultimately been able to identify a single purpose, according to system analysis, this is to ask the wrong question. When asked to discuss the purpose of the church, one group of thirty clergymen listed nearly thirty purposes. More important than stating a single purpose is to discover how all definitions can be put into a functional pattern. A purpose so defined at a theological level may represent many purposes at an action level.

The church does have purpose and our suggesting a community mental health model for the ministry presupposes some working understanding in terms of the direction of the church. Briefly, a major reason for the existence of the church is to facilitate

redemption in the world. Redemption means to bring about the rea-
lization of the potentialities in all people, which is to bring about
a new kind of humanity. The new humanity of which we speak means to
bring into being Christian existence, which is that kind of life ...
where faith, hope, and love are exemplified. The Church is one
means God has to establish this kind of redemption life.

Redemption always comes to man individually, but it cannot
be understood as individualistic. Again, no individual is ever
totally isolated from society and social structures. It is true
that what we experience and how we act is unique and individual,
all takes place within our social situation. We can rightly ask,
"Is it possible, for example, for one person to experience redemp-
tion while all those about him are suffering?" Albert Schweitzer is
credited as saying something to the effect that those who recover
from sickness and suffering through the care of others cannot be
free until there is no more sickness and suffering, as they are
members of the suffering community of the world. As persons-in-
community, if we desire to be responsible for ourselves, we must
also be responsible for our community as it is part of us. Even
from a self-centered point of view, social change agents, such as
Saul Alinsky, demonstrate the validity of changing the community
so we as individuals can benefit from the changes.[49] Jesus taught

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[49]Saul Alinsky, Rules for Radicals (New York: Random House,
1971), pp. 113ff.

the importance of caring for community from another perspective.
Jesus said, "You shall love the Lord your God with all your heart,
soul, and strength, and mind; and your neighbor as yourself" (Luke
10:27). Through loving others we too may receive gifts of love.
At its very best, then, the Christian faith has never been content
for its followers to be individually good persons. The church has
always remembered God's desire to create for himself a "people of
God." The church is one means God has to establish shalem among the
people of God, i.e., peace, harmony, community, and justice in the
world.

If redemption of the world is one of the major purposes of
the church, it follows that the heart of the Church's task is evan-
gelism. As J.C. Hoekendijk observes, evangelism is not a centri-
petal process of proselytizing people into the institutional church,
as this suggests that God is only to be found in the church and that
the church has saving powers of its own. No, the church is only a
sign as it points to the Kingdom of God. Rather, evangelism, ac-
cording to Hoekendijk, is a centrifugal movement. The Christian
mission is to journey away from the center of the church into the
world. God is God of the world, not just of the church.

In a world in which life is lived in large social systems,
institutions and organizations, to act as an individual alone to
help facilitate redemption in the world is by and large a powerless
and inefficient endeavor. It is clear with the interdependency and
interrelationship of the individual and his social stuuctures that

to redeem the individual, these aspects of the structures themselves
that prevent the emergence of Christian existence must also be
changed. Our ministry, then, must not only be to individuals, but
also to the social structures themselves, which will in turn effect
the individuals within them. This means that the church must work
in and through social and political strucutres to improve community
and bring about peace, harmony and justice.

C. A Self-regulating System

The church is not only dynamic and purpose-oriented system,
it is also self-regulating, which is characteristic and essential
for the survival of any system. Since the church is a social system,
which exists among other social entities, it is, consequently, sub-
ject to the same objective sociological and institutional laws as
are all other organizations. Robert Arnett recognizes this and
suggests a "theological study of institutions," namely,

> systematic analysis of institutions; that is, to the structure
> of corporate groups, the powers they wield, the purposes they
> pursue, the means they employ, the ethical ideals they serve,
> and the manner in which they are related in the systems of modern
> life.[50]

This information is part of the information necessary to understand
the self-regulating dynamics of the church. To grasp more fully the
dynamics of a self-regulating system we can, for analytical purposes,

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[50]Robert Arnett, "Toward a Theological Study of Institutions"
Religion in Life, XXXVII:3 (Autumn, 1968), p. 422.

speak of two organizations in one: the formal organization and the informal organization.

The church as a formal organization. The formal part of an organization is that part which is planned to coordinate the efforts of people to achieve a common goal. It is clearly defined by a set of boundaries, within which the organization must remain or have its existence threatened. The church is dependent upon continual input, such as people, money, ideas, materials, buildings, training programs for its members and leaders, etc. This input is utilized and transformed by the church and given out as output, such as a service, funds for ministry, Christian education programs, etc. For stabilization a balanced ratio of input and output must be maintained. Within the church structure there is a division of labor represented both horizontally and vertically by the classical organizational charts. This represents the hierarchy of subsystems which must be coordinated and linked together to make the total system functional. Within each subsystem, as well as linking together each subsystem, are communication networks and lines of authority. All this exists as a formal organization to achieve its goal. Organization provides security for its members, by providing structure and thereby lessening anxiety.

The church as an informal organization. The informal part of an organization differs from the formal in that it does not arise from goals of the organization, but from the needs of the people within the organization. Goals of the formal church organization

are secondary in relationship to the needs of the members who make up the church. The informal organization includes the totality of influence on members outside of formal organization such as status patterns, leadership patterns, fellowship patterns, group norms and sanctions. The informal organization provides what the formal organization cannot, such as a sense of membership, satisfaction in doing tasks, acceptance by co-workers, as well as good conversation and fellowship. Alongside the formal organization, the informal part also has its own communication networks as well as informal leaders vested with the authority of their fellow members.

The formal and informal pasts of a church organization are not two organizations, but they are elements that interact and make up the organization as a totality. For such a system to be self-regulating, it is clearly seen that this process is very complicated and involves the balancing of many forces. On the other hand, when all members have something invested in an organization and their physical, sociological, and psychological needs are being met to some degree, a great deal of pleasure and satisfaction will exist to maintain the system. After all, while organizations have purposes, facilities, and capital, they are ultimately people.

The church is one institution in a world full of institutions. Some institutions, as Arnett says, "serve mankind well,

and some badly."[51] There would be no disagreement that the church

ought to be one of the institutions that is doing its best to serve

mankind. To do this, then, it is imperative that we as church

people take seriously life as lived in institutions. This means

that we can no longer view individuals as isolated units, but

must see persons in relationship with the rest of their life-world.

We need to know how persons interact with one another, as well as

their relationships in small groups, in institutions, and in society.

Our theology must concern itself with all these aspects. We can no

longer deal with theological aspects of persons as isolated units,

but rather as persons-in-community. This means we can no longer

speak of sin or of salvation of persons apart from speaking of sin

or salvation of community as well. Our ethics will have little

place for an individualistic ethic, but must respond to the situa-

tions that confront us in and through the tensions and conflicts

of our social systems, of which we are a part and which constitute

our society and world. As the disciplines of pastoral, moral and

natural theology have bridged themselves with natural sciences and

sciences of man such as psychology and sociology, so too must we

continue to relate theology to all disciplines that will facilitate

the Church as an institution to best serve mankind.

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[51]Ibid.

From the perspective of pastoral theology this does not mean
the demise of a person-centered ministry, but rather recognition that
such a ministry requires organizational structures to support it.
The necessity of viewing persons-in-community as a unitary system
will, on the contrary, enhance a person-centered ministry in that
more of the forces operating upon persons will be recognized which
in turn means the availability of more options to serve people.

III. THE CHURCH, THE MINISTRY, AND COMMUNITY MENTAL HEALTH

Our community mental health view of man as person-in-com-
munity recognizes the many subsystems that comprise the complex
system, man. Human behavior as well as mental and spiritual well-
being is the sum outcome of the total system at any given point in
time. No one system is determinative by itself. All subsystems
are necessary, but none sufficient. The church as part of the
social milieu is also a subsystem of individuals and as such has
a varying effect upon them depending upon their relationship to the
church.

As a social system in the general sociocultural milieu, what
are the possible functions of the church as a subsystem, and how
might this subsystem be seen as a sociocultural force influencing
human behavior?

The church as a community of faith. The local congregation
witnesses to and provides a faith--a loyalty that transcends all
loyalties--which is essential for identity formation and spiritual

well-being. As a "people of God" in community, having a definite

history, a deep sense of eschatological hope, and a clear mission,

resources are available for those seeking direction in life, as well

as opportunities to experience others who have a sense of freedom by

their commitment to God. The church as a community of faith, then,

provides for an individual, a community and a faith, and both are

essential for identity formation.

Drawing upon church history, William Clebsch and Charles

Jaekle identify four pastoral care functions: healing, sustaining,

guiding, and reconiiling.[52] While these are viewed as pastoral

functions, in our community mental health model they can be ex-

panded to be also functions of the church as a social system.

The church as a healing center. Healing is the restoration

of the person to wholeness, which implies overcoming some impairment.

If the individual becomes ill spiritually, it happens in relation-

ship and community. Likewise to be made whole, healing must take

place in community. The church as a christian community offers an

atmosphere of Christian love which bears all things, believes all

things, hopes all things, endures all things, and never ends (I Cor.

13:7, 8). Love is the source from which men learn to attribute value

to others, which in turn leads to creation of community among men.

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[52]William A. Clebsch and Charles R. Jaekle, *Pastoral Care In Historical Perspective* (Englewood Cliffs: Prentice-Hall, 1964) pp. 7f, 33.

In such a community, these of a broken spirit and out of harmony in life, find healing forces to help make them whole.

The church as a guiding, learning-growth center. Guiding implies enabling and assisting persons to make choices in their lives, which will effect the course of their lives as well as their spiritual well-being. The church can be a center that offers guidance for people through the rich resources of its history and faith, as well as through hearing the Word in preaching, seeking counsel, and interaction and fellowship with others. Through the teachings of the church, models of human behavior are presented suggesting how to deal with anger, child-rearing, pride, sexuality, competition, etc. Through its educational classes, guidance programs, rites and sacraments, the church can also provide some preparation for the natural psychosocial and psychosexual life crises that each of us encounter in our development. The church has the potential to be a potent educational subsystem of society.

Another guiding function of the church as a social system is as a "moral agency." Every culture requires a system of checks and balances--a cultural ego system if you will."[53] The church can help a community to examine the morals of its culture and the sentiments

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[53]E. Mansell Pattison, "Systems Pastoral Care," The Journal of Pastoral Care, XXVI:1 (March, 1972), p. 9.

of its people. G.C. Homans in his book, The Human Group,[54] reminds us that we must examine groups as a total system. He cites the following three aspects of all groups: their physical activities, the transactions between group members, and the sentiments of the members. The sentiments are the hopes, dreams, and values of people and act as adhesive ingredients that hold the group together. It is at this point that the church is unique in that it is the only institution that has as its central concern the meanings and values of life. The church, both in the community and in the culture, can continually raise the question of meaning and challenge these sentiments which are dehumanizing and unjust. The church, then, acts as a boundary sturcture for the cultural system. This is important as boundaries must be maintained for the survival of any system, which would apply to cultural systems as well.

The church as a sustaining center. Hoekendijk's model of the church in centrifugal movement implies a genuine community of the people of God as a center from which to move outward in mission. Within such a community, basic needs such as trust, a sense of belonging, fellowship, sense of freedom, accomplishment, can be met and, thereby, sustain people and facilitate growth. Eriksen claims that these basic needs in each of us are permanent and that we need to have some institution that will renew these feelings. The local

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[54]G.C. Homans, The Human Group (New York: Harcourt, Brace, 1950).

congregation through its worship, fellowship, projects, and cele-
brations provide the continual possibility of these needs being met,
and, thereby, is a sustaining social system. Only from the strength
offered by a sustaining community, can a people of God move outward
in mission.

The person-in-community presupposes a vital necessity of
ongoing interaction with others as no person is sufficient unto
himself. As Pattison states, "People who have no natural groups,
no meaningful social systems, are quite likely to become and remain
dysfunctional. All of us are maintained, sustained, restrained,
corrected and nourished by a vaiiety of human groupings."[55] While
the church is no longer the central social system of society to
provide this ongoing group nurturance function, it does provide as
a social system. The church, then, is a sustaining center.

The church as a center of reconciliation. As Alinsky's
statement at the beginning of this chapter so clearly portrays, we
are creatures surrounded with tension and conflict. We all exper-
ience being torn apart. Reconciliation is the re-establishing of
broken relationships between two individuals as well as between
the individual and God. How we cope during times when we experience
broken relationships and, subsequently, dysequilibrium, relates not
only to our own capacities, but also to our social milieu. "The

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[55]Pattison, op. cit., p. 10.

family can absorb and help reintegrate the distraught, torn member. The neighborhood can help a family weather a crisis."[56] The church as a social system can provide aid and reconciliation for, not only its members but others in the community.

As a preventive thrust the local congregation not only can be a reconciling center, but can be a miniature life laboratory to help prepare people to better handle tensions as well as to learn how to handle conflict creatively through wise conflict management. Tension and conflict are part of the dynamics of change in any system and if resolved properly will facilitate growth. Conflict will not disappear by concealing it or pretending it does not exist. Eventually it will raise its ugly head. An openness to conflict improves the possibilities of positive resolution. Openness can be taught. Thomas Brigante once theorized in a lecture, that where there is more openness in conflict, there would also be more willingness to accept emotional conflict. By responsibly and openly encountering and dealing with "hot" issues that confront a congregation, and corporately experiencing successful resolution and reconciliation through forgiveness or compromise, people will have a basis upon which to accept and deal more openly with their own personal conflict.

In emphasizing the ancient functions of the minister such as healing, sustaining, guiding, and reconciling, our model of ministry

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[56] Ibid., p. 11.

calls again for moving toward a pastoral or shepherding model. As we saw in our first chapter the pastor was the shepherd of his congregation caring for the souls of each individual. He ministered to the sick, the wounded, the needy or whatever was disturbing the individual. Eventually the government and new professions took over many of these functions. With the rise of psychology and psychoanalysis, a clinical model tended to replace the pastoral model. The pastor developed the clinical skills of one-to-one counseling and psychotherapy and applied these to the ministry. The community mental health model moves out of the clinical setting back into a pastoral model, but offering a different perspective. The earlier pastoral model was one of shepherding individuals. This image must change to the pastor who can also shepherd social systems, which means he is capable of dealing effectively with not only individuals, but with the social systems of which the individuals are a part.

This means a change in mode of operation for the pastor, The earlier model of shepherding focused upon individuals with little regard to the social systems affecting the individuals. The shift towards a clinical model was still one of an individualistic approach. In both models intervention was aimed at one subsystem of the individual, usually the subsystem most accessible. Feeding a hungry family a meal without helping the father to find work will not change the problem for that family. Or to be preoccupied with the intrapsychic subsystem to the neglect of other subsystems may have little influence in changing specific behavior. The community

mental health model, utilizing system intervention, always takes
into account the total system characteristics. If one intervenes
with only one subsystem, what will be the effect on all other sub-
systems as well as requirements for re-equilibrium? Shepherding
now means that one is concerned not only with one subsystem, usually
the most seemingly obvious one, but all subsystems and the possible
interventions with various subsystems.

This does not mean that clinical skills are left behind, as
they are basic and necessary. Rather the skills and methods of sys-
tem intervention go beyond the skills of one-to-one interaction.
Small group and family therapy skills are a beginning. We must
move still further to additional skills in system intervention that
indlude "the ability to organize new social systems to gain entry
and effect change in existing social systems, and rehabilitate
social systems."[57]

There is another basic change in the mode of operation in
shepherding from the perspective of community mental health. In the
one-to-one approach the pastor is trained to operate by himself.
In terms of systems theory, the individualistic approach is not
very effective when dealing with social systems. Rather the pastor
works with social systems to minister more effectively. He will be

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[57]Ibid., p. 7.

one who can enable the social system within which he works, the
church, to become a center for healing, a center for personal learn-
ing and growth, a center for human sustenance and nourishment, and a
center for reconciliation.[58]

The new direction of community mental health with its emphasis
of ministering to all subsystems of an individual as well as its
focus on prevention offers new directions and possibilities for the
ministry of the church. The spiritual life of the individual cannot
be separated from his mental health, which is rooted in the com-
munity. To keep ever before us the individual as person-in-community
will allow us to pursue a wholistic approach to our ministry.

> Just as the wave cannot exist for itself but must always par-
> ticipate in the swell of the ocean, so we can never experience
> our lives by ourselves, but must always share the experiencing
> of life that takes place all around us.[59]

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[58]Ibid., p. 14.

[59]Albert Schweitzer, "No Man Is An Island," Alive Now,
(Spring, 1972), p. 28.

CHAPTER V

SUMMARY AND IMPLICATIONS

Pastoral counseling has grown alongside that of depth psychology and psychoanalysis and has reflected the developments and outgrowths in these areas. For the last five to ten years all three disciplines have been and still are at a crossroads, both in understanding of man and in psychotherapy. The crossroad is due to the growing recognition in the social and behavioral sciences that man cannot be understood apart from his social environment. The "person-in-community" becomes a unitary concept.

The implication of this concept in terms of counseling is to understand psychological activity as an interplay between the individual and his environment. This is in contrast to those psychologists who, until recently, have always tended to agree that human behavior is a function of at least two sets of events, namely, those that take place within the individual and those that take place outside of him with psychologists focusing on intraindividual processes leaving the analysis of environment to other disciplines. Such a focus seriously limits our understanding of behavior in the person's total life situation.

With the recognition of the crossroads of pastoral counseling, we began with the thesis that pastoral counseling as a discipline needs to be broadened by a redefinition that has a more encompassing foundation which will incorporate a broader, unifying view of man as "person-in-community." By relating theology to community psychology we were able to widen the horizons and implications for pastoral

counseling and the ministry.

In our first chapter we briefly sketched the history of pastoral counseling which evolved as a specialized function of pastoral care. In the history of the development of pastoral care there are both psychological and sociological roots. With the advent of psychology and psychoanalysis the sociological roots were neglected. It was shown that if pastoral theology is to move beyond the present crossroads in which pastoral counseling now finds itself, it must begin by bridging not only psychology, but sociology and anthropology as well. Only through an interdisciplinary approach can we arrive at a wholistic understanding of the individual. The more we know about the individual, greater are the possibilities of ministering to him.

Community psychology is attempting to bridge these disciplines. What is evolving is a community mental health perspective which defines the need for not only a counselor, but also for a social change agent as well as the interrelationship of these two roles. Creating a community mental health model for the pastor, we were faced with two possible extremes: the role of the pastor as counselor is at one extreme absorbed by other roles or at the other end of the spectrum, we become imperialistic to define all of ministry as pastoral counseling. Our position was to evolve a community mental health model that is applicable for the ministry from the perspective of pastoral counseling.

The bridging of disciplines is no small endeavor. We turned to general systems theory to provide a framework to deal with the complexity of our task. On the basis of open system theory we developed

a community mental health view of man, integrating many points of view
into a more comprehensive, unified understanding of man.

Our model of ministry from the community mental health per-
spective recognizes a direct relationship between the individual and
his natural and social environment. To facilitate growth and change
of the individual to the neglect of his social systems is net the
most fruitful approach. Community mental health offers a broader
approach considering all subsystems as possible points of intervention.
For the pastor this offers a model for ministering to both the in-
dividual as well as his social systems. Changing social systems can
be a preventative measure for individuals so that the necessity of
"picking up the pieces" may be lessened.

The community mental health model moves beyond merely inter-
vening in individual lives, but intervening on a community level as
well. Community intervention involves the following assumptions.
First, the individual and community are viewed as a unitary concept,
a complex system in which parts are identifiable, but are interdepen-
dent. Second, sources of psychopathology are not only within the
individual, but are also within the social systems in which he lives.
Third, prevention is the aim and requires more active involvement of
the pastor and the church within the community itself. Fourth, since
prevention involves changing social systems, social or political action
is going to be required. Fifth, a more compassionate view of the com-
munity with its strengths and weaknesses is needed. Sixth, the pastor
concerned about prevention must be suspicious, always on guard for
potential disability and possible preventive intervention. Seventh,

this model is a process or growth model and not an illness model.

IMPLICATIONS CONCERNING MAN

1. Any social system can be understood a great deal better if one connects the system "man" with the whole system. Individuals comprise social systems. By introducing the human factor into the analysis of the whole system, we are better prepared to understand organizational dysfunctioning and to define norms which relate positive functioning to the optimal well-being of the people who participate in it.

2. A person is an individual, yet the individual cannot be understood apart from his social milieu. Culture is a major conditioning of becoming, yet personal integration is always a more basic fact. Our view of man takes into account _idiographic_ as well as _nomethetic_ aspects of personality, viewing man as both an individual and at the same time at one in community. We expressed this wholistic view as person-in-community.

3. Our community mental health model offers a more comprehensive view for understanding behavior. Growth deficits (Maslow) are not the sole result of social environment or of psychological instabilities of the individual. Rather deficits in growth result as an interaction of social, psychobiological and cultural forces. This is a continual sequential process with the degree of conflict resolution of past experiences effecting present coping abilities and behavior.

4. Systems theory offers a means to incorporate many views of man into a unified system of man. Based upon four major aspects of open systems, we defined man as a person-in-community who is an active dynamic, open system of interacting forces in which there is exchange of both matter and energy; achievement and maintenance of steady states; growth via increase of order, complexity, and differentiation; and transactional commerce with the environment.

IMPLICATIONS CONCERNING MINISTRY

1. Pastoral care is an outgrowth of the nineteenth and early twentieth centuries and carries the connotations ascribed to the words "pastoral" and "care." Pastoral is an agrarian and static society concept, meaning "shepherding the flock." The word "care," while we recognize the larger role of the pastor as he moves among his people, has had the emphasis of being clincial. Today amidst the complexity of our urbanized, mobile society, the pastor needs to be viewed as the ministering servant in community, who understands his unique responsibilities within the community as the servant of the community interacting with other individuals and agencies of that community. The approach for caring shifts from a clinical to a community shepherding emphasis.

2. The community mental health model offers a ministry that overcomes the limitations of a one-to-one approach. The individual is not viewed as an isolated unit, but as person-in-community. Psychotherapy is always a counterpunching approach with questionable efficiency and effectiveness. It is usually directed at a subsystem,

such as the intrapsychic subsystem, to the neglect of other subsystems that may have more change-potential. The one-to-one approach is also costly in time and money as well as it is passive. Working with the individual in groups, organizations, and institutions of which he is a part is more efficient use of time and resources and aims at many subsystems of the individual. This involves the pastor to go to the community, rather than wait for persons to come to him.

3. The pastor ministers not only to the individual, but also to social structures. The goal is to change the social, economic, and cultural life of our society in such a way that it stimulates and further enhances the growth and "aliveness" of man rather than crippling it. All social systems can be reduced finally to people and if we can use our technological capacities to change systems that help activate the individual rather than making him passive and receptive, this will serve man's growth.

4. Tension and conflict are the dynamics of change. The pastor must become a good manager of conflict resolution, not only on a personal one-to-one basis, but also on an intragroup and intergroup basis. Openness and the support of groups and use of community support are keys in lessening alienation and ingredients to creative growth for all involved. While the one-to-one approach is not an adequate model for a total ministry, this approach is an important part of the pastor's role in resolving group conflict. Growth is better facilitated and conflict better resolved if individuals of groups involved are individually listened to and supported.

5. The pastor becomes a specialist, not in any one field, such a psychology or sociology, but rather as a comprehensivist. His base is theology from which he bridges many disciplines to attain a more comprehensive view of man. He integrates information from many disciplines to help him and his church better minister to the congregation and community.

6. The pastor's role, according to our community mental health model, is one of being a "participant-conceptualizer." He involves himself and participates in the process of ministry, then steps back to evaluate and conceptualize in order to move back into participation more efficiently and with new and clearer direction.

7. The pastor works with individuals, groups, and social systems. The demands are great, the possibilities are many, and time is limited. This means that the pastor must plan and be be a good manager, both of his time and of his church. Dr. Arnott is right in his suggestion that administration is a valid form of ministry. Goals must be established, people and resources coordinated to attain goals, decisions must be made, authority must be delegated for the operation of a congregation in mission. If the pastor is going to act as a social change agent and be able to mobilize people and move within a community, he must have management skills and knowledge of organizational theory to be effective.

8. Community mental health takes leave of psychology as persons are not just individuals, but are persons-in-community. Our theology can no longer be individualistic, but must be communal. While all of

us are individuals, we are not isolated individuals or, therefore, individualistic.

9. The purpose of the church is to facilitate redemption in the world, which is to bring about a new kind of humanity. By new humanity, we mean to bring into being Christian existence, which is that kind of life where faith, hope, and love are exemplified. The church is one means God has to establish this kind of redemptive life.

10. Redemption always comes to man individually, but never individualistically. We can never separate the individual from his social systems. Redemption is related to the redemption of the people of God among which God desires to establish shalom.

11. The minister being a disciple of Christ, therefore, represents God's will for mankind (Phil. 2:7). The role as a representative of Christ is eminently a political role. Anyone who identifies with man and his problems is a political figure and a potential cause of trouble in society. Authority is given to the minister by his office. But his power rests in the confidence and consent of his people whom he is serving. To be man's confidant implies a power over human beings which makes the minister a highly political figure. Only as man's confidant do you get to political action and not vice versa. Of course, as Reinhold Niebuhr observes, the only real enemy is your own self, for whom this power is the worst temptation of all. The pastor, therefore, must keep ever before him who he represents and remain the servant of Christ and not the master of men (Phil. 2:7).

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